Surce, Apt. #, etc.       Suite, Apt. #, etc.       5. Certificate of Status Desired       \$8.75 Additional Fee Required         22       27       City & State       6. Election Campaign Financing Trust Fund Contribution       \$5.00 May Be Added to Fees         23       28       Country       8. This corporation has liability for intangible tax under s. 199.032.         24       25       29       30       Florida Statutes       \$8.75 Additional Fee Required         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       \$8.75 Additional Fee Required         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       \$8.75 Additional Fee Required         2399 NE SECOND AVE. MIAMI FL 33137       81       Name       \$82         84       City       FL       85       Zip Code         11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent 1 and accept the obligations of, Section 607 0505, Florida Statutes       Section 607 0505, Florida Statutes         SIGNATUFE       Spector spectrum percentage tage the diagent agent agent agent registered Agent spectrum require when reinstatleg)       Date		ANNU	DRPORATION Sandra B NUAL REPORT Secretar		RTMENT OF STATE B. Mortham ary of State CORPORATIONS	FILED Apr 04 1997 8:00am Secretary of State	
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2     27     6. CarrAction Distance Data Desired     Fee Begunded       City & State     21     21     21       Zip     Country     21     21       Zip     21     21     21       Zip     Country     21     21       Zip     21     22     21       Zip     23     21     21       Zip     23     21     21       State     21     23     21       State     21     23     21       State     21     23     21       State     21     23     21       State     21     21        State     21 <th>22     27     City &amp; State     City &amp; State     6. Confinction of Status Researcd     Teo Required       21     City &amp; State     City &amp; State     6. Bloction Campaign Financing     S5.00 May 5e       7 p     28     29     20     Contriv     4. This composition has liability for any nogline that when the signal financing       7 p     28     29     20     Country     4. This composition has liability for any nogline that when the signal financing       2 p     28     29     20     Country     4. This composition has liability for any nogline that when the signal financing       2 p     28     28     28     28     70     Country       9. Name and Address of Keyr Registered Agent     10. Name     10. Name and Address of Keyr Registered Agent     10. Name and Address of Keyr Registered Agent       11. Durative to it in provid size of Societies 600 2000 and fibrits. Societ of Corp. Societies and composition is bacteriating and address of Keyr Registered Agent     11. Characteriation and address of Corp. Societies and Comparison bacteriation and address of Corp. Societies and Comparison bacteriation and address of Corp. Societies and Cor</th> <th></th> <th>nace of business</th> <th></th> <th></th> <th></th> <th>▶{</th>	22     27     City & State     City & State     6. Confinction of Status Researcd     Teo Required       21     City & State     City & State     6. Bloction Campaign Financing     S5.00 May 5e       7 p     28     29     20     Contriv     4. This composition has liability for any nogline that when the signal financing       7 p     28     29     20     Country     4. This composition has liability for any nogline that when the signal financing       2 p     28     29     20     Country     4. This composition has liability for any nogline that when the signal financing       2 p     28     28     28     28     70     Country       9. Name and Address of Keyr Registered Agent     10. Name     10. Name and Address of Keyr Registered Agent     10. Name and Address of Keyr Registered Agent       11. Durative to it in provid size of Societies 600 2000 and fibrits. Societ of Corp. Societies and composition is bacteriating and address of Keyr Registered Agent     11. Characteriation and address of Corp. Societies and Comparison bacteriation and address of Corp. Societies and Comparison bacteriation and address of Corp. Societies and Cor		nace of business				▶{
City & Statu       City & Statu       25.00 May Be         21       Zi       Contriny       8. Exection Campaign Financing       \$5.00 May Be         22       Zi       Contriny       9. This corporation has bablely for under 5.190.02, Product Statutors May Be       Added to Fees         23       2       20       20       20       20       20       20         24       2. Nome and Address of Current Registered Agent       51       Name and Address of Nam Registered Agent       51         25.00 May Be       Contriny       6. This corporation has bablely for under 5.190.02, Product Statutors May Be Statutors May Registered Agent       51       Name         26.0 Max Be SECOND AVE.       51       Name       Street Address (P.O. Box Number is Not Acceptable)       53         53       54       City       FL       65       20       Codo         11. Pursuent to the process ond 61 Sections Go? Otdo? and 60? 1506, Fabrid Statutors, the above named corporation subard of directors. Thereby accept the appointment as registered agent       55         35       Contriny       Contriny       Contriny       11       This statutority in the appointment as registered agent         36       City on the in the Statu of Trotes Sector directory in we substrond to the controls the appointment as registered agent       Controls       Controls <tr< th=""><th>City &amp; Statu       25       Contriny       8       Election Campaign Financing       Xdde to Fies         21       21       20       20       0       Outrity       9       Thue Controlization       Xdde to Fies         22       20       20       20       0       0       Name and Address of Current Registered Agent         23       20       20       20       20       0       Find a Status       20       Xdde to Fies         24       20       20       20       20       0       Find a Status       20       Xdde to Fies       Xde to Fies         24       24       20       20       20       0       Find a Status       20       Xde to Fies       Xde to Fies</th><th></th><th>#, etc</th><th></th><th></th><th>5. Certificate of Status Desired</th><th></th></tr<>	City & Statu       25       Contriny       8       Election Campaign Financing       Xdde to Fies         21       21       20       20       0       Outrity       9       Thue Controlization       Xdde to Fies         22       20       20       20       0       0       Name and Address of Current Registered Agent         23       20       20       20       20       0       Find a Status       20       Xdde to Fies         24       20       20       20       20       0       Find a Status       20       Xdde to Fies       Xde to Fies         24       24       20       20       20       0       Find a Status       20       Xde to Fies		#, etc			5. Certificate of Status Desired	
71:       Courley       20       Courley       8. This constraints as liability for earning to fair uptor 5: 199.032, This course and Address of Current Registered Agent         21:       21:       20	7 r.       Courtey       70       Courtey       8. This corporation has fability for aprophin to under s. 199.052, Provide Statute .         9. Name and Address of Current Registered Agent       91       Name and Address of Current Registered Agent         CAPRARD, FRANZ       91       Name and Address of Current Registered Agent         92       Streat Address of Current Registered Agent       91         93       Streat Address of Current Registered Agent       91         94       Streat Address of P.O. Box Number is Not Acceptable)       92         94       Current Streat Statutes, the above-named corporation submits Vis statement for the purpose of changing its registered price of reprotend specific Fabrics Statutes, the above-named corporation submits Vis statement for the appointment as registered price of reprotend specific Fabrics Statutes, the above-named corporation submits Vis statement for the appointment as registered price of reprotend specific Fabrics Statutes and the above-named corporation submits Vis statement for the appointment as registered price of reprotend specific Fabrics Statutes and the appointment as registered for Current Protections of State OF CPG State Statutes, the above-named corporation submits Vis statement for the appointment as registered for Current Protections of State OF CPG State Statutes, the above-named corporation submits Vis statement for the appointment as registered price of the appointment as registered for Current Protections of State		0			6. Election Campaign Financing	
24     35     20     Fords Stutters     24     The contrast of Current Registered Agent       10. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       2399 NE SECOND AVE. MAMILE 13137     11     Name     10. Name and Address of New Registered Agent       11. Pursuent to the procession of Sections 607 (600 and 607 1508; Fords Statutes, the above named corporation submits his statement for the purpose of changing its registered of the not spatial action to the state of the not spatial changes, the above named corporation submits his statement for the purpose of changing its registered of the not spatial changes in the Same of Sections 607 (600 and 607 1508; Fords Statutes, the above named corporation submits his statement for the purpose of changing its registered of the not spatial changes in the Same of Sections 607 (600 and 607 1508; Fords Statutes, the above named corporation submits his statement for the purpose of changing its registered of the not spatial changes in the Same of Sections 7 (1000; CHANGES TO OFFICERS AND DIRECTORS IN 12       11. Pursuent to the spatial changes in the Same of Section 20 (1000; CHANGES TO OFFICERS AND DIRECTORS IN 12     Define of the spatial changes in the spati	23       isid       <		Country	· · · · · · · · · · · · · · · · · · ·	Country		
CAPRARO, FRANZ 2389 NE SECOND AVE. MAMI FL 33137     81     Name       11. Pursuent to the provise as of Sections 607 6502 and 600 and 6	CAPPARO, FRANZ 2389 NE SECOND AVE. MANI FL 33137       61       Name         62       Street Address (F.O. Box Number is Not Acceptable)         63       64       City       FL       85       Zip Code         71.       Pursuent to the proved and of Sections 607 0502 and 507 1508, Florida Statutes, the above named corporation submits his statement for the purpose of changing its registered office or registered agent of bads, in the State of Tenda Statutes, the above named corporation submits his statement for the purpose of changing its registered screat true bades of tends, in the State of Tenda Statutes, the above name address of the corporation submits his statement for the purpose of changing its registered screat true bades of tends, in the State of Tenda Statutes and the corporation submits his statement for the purpose of changing its registered screat true bades of tends, in the State of tends and purpose address of the corporation submits his statement for the purpose of changing its registered screat true bades of tends in the State of tends in the State of the corporation submits his statement for the purpose of the corporation statement for the purpose in the State of tends in the State of tends State (CAPARO, FRANZ 2000 State of tends in the State of tends in the State of tends state of tends in the State of tends in the State of tends State (CAPARO, FRANZ 2000 State of tends in the State of tends in the State of tends in the State of tends in the state atmetee (CAPARO, FRANZ 2000 State of tends in tends in the State of tends in the State of tends in the state atmetee (CAPARO, FRANZ 2000 State of tends in the State of tends in the State of tends in the State of tends in the state atmetee (CAPARO, FRANZ 2000 State of tends in the State of tends in the State of tends in tends in the State of tends in tends in the S				30	Florida Statutes	Yes No
2399 ME SECOND AVE:     MAXIE R. 33137      Prevant to the provision of decision 607 0500 and 607 1500. Florida Statutes. The above named corporation submits his stationers for the provision of decision 607 0500 and 607 1500. Florida Statutes. The above named corporation submits his stationers for the provision of the outport of the corporation of the corporation of the provision of the appointment as registered agent of the corporation above and of directors. Thereby accept the appointment as registered agent of the corporation of th	2399 HE SECOND AVE:     MAXIE FL 33137      49     210 Extended defenses (P.O. Box Number is Not Acceptable)     49     210     2	CAF	······································	rrent Registered Agent	81 Name	10, Name and Address of New N	
B3         B4         City         EL         B5         Zip Code           11. Pursuent to the processor use of Sections 607 (562 and 607 1568, Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent fand tarrels with and accept the obligators of, Section 607 (669, Florids Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent fand tarrels with and accept the obligators of, Section 607 (669, Florids Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent fand tarrels with and accept the obligators of, Section 607 (669, Florids Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent fand tarrels.           SIGPATURE         OFTICE RS AND DIFE CORES         13.         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I hereby accept the appointment as registered agent, for both, in the Statut of Index Section 607 (500, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, for both, in the Statut of Index Section 607 (500, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and the appointment as registered agent. I appoint the appointment as registered agent.           12.         D         D         D         D         D         D         D         D         D         D         D         D         D         D         D         D</td><td>239</td><td>9 NE SECOND AVE.</td><td></td><td>82 Street Add</td><td>Iress (P.O. Box Number is Not Accepta</td><td>ble)</td></t<>	B3         B3           B4         City         FL         B5         Zip Code           11. 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It.       Production of the prove care of Sections (07.05/02 and 607.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Statu of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the Statu of Florida Statutes.         SIGNATURE       The proves are of Sections of Sections of Sections of Sections (Proves are of Sections and Sections (Proves are of Sections and Sectins and Sections and Secti	It       Product of the provide or of Sections 607 05/02 and 607 1506. Florids Statutes, the above named corporation submits this statement for the purpose of changing its registered agent or both in the State of Florids Statutes. The above named corporation's board of directors. I hereby accept the appointment as registered agent or both, in the State of Florids Statutes.         12.       OFFICE RS AND DIRE CTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         13.       OFFICE RS AND DIRE CTORS IN 12.       DATE         14.       OFFICE RS AND DIRE CTORS IN 12.       DATE         15.       OFFICE RS AND DIRE CTORS IN 12.       DATE         14.       OFFICE RS AND DIRE CTORS IN 12.       DATE         15.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.       DATE         16.       DATE       13.58812.008855       Date         2399 BE SECOND AVE.       13.58812.008855       Date       Date         10.11 ET       13.178.2       Date       Date       Date         2015 SD DIRE HWY STE 900       23.57827.008655       Date       Date       Addition         10.11 ET       3.178.4       24.007.57.2P       Date       Addition         10.11 ET       3.57827.008655       Date       Date       Addition         10.12 ET       3.57827.008655       Date       Date       Date<				84 City		85 Zio Code
agent 1 and fundar with and accept the obligators of. Section 607 0005, Florida Statutes.     Sint Aluer.       SIGNATURE	agent 1 are formal source with and accept the obligations of, Section 607 0505, Florida Statutes.       SIGNATURE       SIGNATURE       DEFLICE AS and perfamiliate and constrained approximation approximatine approximation approximation approximation approximation	11, Pursuant	to the provisions of Sections 607	.0502 and 607 1508, Florida Stati	utes, the above-named cor	poration submits this statement for the	ournose of changing its registered
International processor and a product agent	Date       Date       Date         12       Officeration of a paint applicable       (MOTE Regulation advance and an equipation advance a	office or r	registered agent, or both, in the S	state of Florida. Such change was	authorized by the corpora	tion's board of directors. I hereby acce	pt the appointment as registered
12.       OFFICE RS AND DIRE CTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       0         14.1       D       DELETE       11111E       Change       Addition         MM       CAPPARO, FRANZ       124MAE       124MAE       124MAE         2399 NE SECOND AVE.       13 STRET ADDRESS       13 STRET ADDRESS       13 STRET ADDRESS         CITY ST 7P       MIAMI FL       14 CITY-ST-2P       Change       Addreon         WOLFSON, LOUIS III       22 KMAE       23 STRET ADDRESS       14 CITY-ST-7P         WIAM       StRET ADDRESS       24 CITY-ST-7P       Change       Addreon         STRET ADDRESS       23 STRET ADDRESS       24 CITY-ST-7P       Change       Addreon         STRET ADDRESS       33 STRET ADDRESS       33 STRET ADDRESS       CITY ST 7P       Change       Addreon         STRET ADDRESS       33 STRET ADDRESS       33 STRET ADDRESS       CITY ST 7P       Change       Addreon         STRET ADDRESS       33 STRET ADDRESS       33 STRET ADRESS       CITY ST 7P       Change       Addreon         STRET ADRESS       33 STRET ADRESS       CITY ST 7P       Change       Addreon         STRET ADRESS       STRET ADRESS       STRET ADRESS       CITY ST 7P       Change       Ad	12.     OFFICE RS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       11.     D     DELETE     11TILE     Damp     Addition       12.     CAPPARO, FRANZ     12 WWE     12 WWE     12 WWE       2399 NE SECOND AVE.     13 SIMET ADDRSS     13 Change     Addition       17. Str ZP     MIAMI FL     14 Ch1*-SF-ZP     Drange     Addition       17. Str ZP     MIAMI FL     0 DELETE     21 TILE     22 WWE       Strint MORELS     33 SIMET ADDRSS     23 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     23 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     23 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       11.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       12.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       12.1     0 DELETE     33 SIMET ADDRSS     0 Drange     Addition       12.1     0 DELETE     33 SIMET ADDRSS     0 Drange <t< th=""><th>SIGNATURE</th><th>Street as the state of a street of the second street street.</th><th>diametrical and the diametricable (NC</th><th>11' Bestistered Abent signature repu</th><th>ired when reinstation</th><th>DATE</th></t<>	SIGNATURE	Street as the state of a street of the second street street.	diametrical and the diametricable (NC	11' Bestistered Abent signature repu	ired when reinstation	DATE
NAM     CAPRARO, FRANZ     12 NAME     13 STRET ADDRESS     2399 NE SECOND AVE.     13 STRET ADDRESS       CHY_ST_2P     MIAMI FL     14 DIY-ST_2P     14 DIY-ST_2P     10 DELTE     21 NILE     10 DELTE     11 NILE     10 Addition       MAXE     WOLFSON, LOUIS NI     22 NAME     23 STRET ADDRESS     23 STRET ADDRESS     10 DELTE     21 NILE     10 DELTE     21 NILE     10 DELTE     10 DELTE     21 NILE     10 DELTE     10 DELTE<	NAM     CAPARAO, FRANZ     12 MANE     12 MANE     13 STRET ADDRESS       STRET ADDRESS     2399 NE SECOND AVE.     13 STRET ADDRESS     13 STRET ADDRESS       CIT & ST 2P     P     DELETE     21 TITLE     Drange     AddRign       NAM     WOLFSON, LOUIS III     23 STRET ADDRESS     23 STRET ADDRESS       Strett AURELS     35 SO DIXIE HWY STE 900     23 STRET ADDRESS     Change     AddRign       NAM     Strett AURELS     33 STRET ADDRESS     Change     AddRign       SIMIT     DELETE     31 TITLE     Change     AddRign       NAM     Strett AURELS     34 STRET ADDRESS     Change     AddRign       SIMIT ADDRESS     34 DITY ST-2P     Change     AddRign       TITL     DELETE     31 TITLE     Change     AddRign       SIMIT ADDRESS     34 DITY ST-2P     Change     AddRign       TITL     DELETE     41 TITLE     Change     AddRign       SIMIT ADDRESS     42 DITY ST-2P     Change     AddRign       TITL     DELETE     51 TITLE     Change     AddRign       SIMIT ADDRESS     Change     STRET ADDRESS     Change     AddRign       SIMIT ADDRESS     Change     STRET ADDRESS     Change     AddRign       SIMIT ADDRESS     Change </th <th>12.</th> <th>OFFICERS</th> <th>AND DIRECTORS</th> <th></th> <th></th> <th></th>	12.	OFFICERS	AND DIRECTORS			
strett Actiers     2389 NE SECOND AVE.     13 STRET ADDRESS       city strze     14 dttv-strze       P     DELETE       visit     22 Avake       strett Actiers     23 STRET ADDRESS       city strze     Addition       strett Actiers     23 STRET ADDRESS       city strze     Addition       strett Actiers     23 STRET ADDRESS       city strze     MAM       Strett Actiers     23 STRET ADDRESS       city strze     Addition       NAMI     DELETE       31 Titte     24 dttv-strze       MAM     DELETE       Strett Actiers     23 STRET ADDRESS       city strze     Addition       Strett Actiers     23 STRET ADDRESS       city strze     24 dttv-strze       MAM     DELETE       Strett Actiers     23 STRET ADDRESS       city strze     33 STRET ADDRESS       city strze     44 dttv-strze       DELETE     31 Titte       City strze     Change       Addition     42 dttv-strze       City strze     24 dttv-strze       City str	Strict ActiveSs     2399 NE SECOND AVE.     13 Strict Addelss       City St 72     MAMI FL     14 City-St 72       P     DELETE     21 title       WOLFSON, LOUIS III     23 Strict Addelss       9350 SO DIXIE HWY STE 900     23 Strict Addelss       City St 74     24 City St 74       MAM     DELETE       9350 SO DIXIE HWY STE 900     23 Strict Addelss       City St 74     DELETE       1111     DELETE       11111     DELETE       11111						
P       DELETE       21 TITLE       Change       Addition         NME       WOLFSON, LOUIS III       23 STREET ADDRESS       23 STREET ADDRESS         STNET ADRESS       MIAMI FL       24 CITY-ST-2P	P       DELETE       21 Title       Change       Addition         NME       WOLFSON, LOUIS NI       22 NME       22 NME       23 STREET ADDRESS         Sthet ADDRESS       MIAMI FL       22 AUME       23 STREET ADDRESS       4 dDIY-ST-ZP         NITE       DELETE       33 STREET ADDRESS						3
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Street ADRESS       9350 SO DIXIE HWY STE 900       2.3 STREET ADDRESS         CIV: S1-20       MIAMI FL       2.4 CIV-S1-ZIP         TULE       3.1 ITLE       3.1 ITLE         NAME       3.2 NAME         STMET ADDRESS       3.3 ITLE         CIV: S1-20       3.4 DIV-S1-ZIP         TULE       3.4 DIV-S1-ZIP         CIV: S1-20       3.4 DIV-S1-ZIP         TUELT       DELETE         ALMRE       4.4 DIV-S1-ZIP         TUELT       DELETE         ALMRE       4.2 NAME         STRET ADRESS       CIV-S1-ZIP         TUELT       DELETE         ALMRE       Change         Addition       4.2 NAME         STRET ADRESS       CIV-S1-ZIP         TUELT       Change         NEW ADRESS       CIV-S1-ZIP         TUELT       Addition         NAME       STRET ADRESS         CIV-S1-ZIP       Change         TUELT	Strikt AURRESS       23 STREET ADDRESS         CITY-S1-7P       24 CITY-S1-7P         TITLE       24 CITY-S1-7P         NAME       24 CITY-S1-7P         NAME       31 TITLE         CITY-S1-7P       33 STREET ADDRESS         CITY-S1-7P       33 STREET ADDRESS         CITY-S1-7P       34 CITY-S1-7P         TITLE       34 CITY-S1-7P         TITLE       Change         Addition       44 CITY-S1-7P         TITLE       Change         TITLE       Change         Addition       44 CITY-S1-7P         TITLE       Change         TITLE       Change         Addition       44 CITY-S1-7P         TITLE       Change         Addition       44 CITY-S1-7P         TITLE       Change         Addition       44 CITY-S1-7P         TITLE       Change         Addition       53 STREET ADDRESS         CITY S1-7P       STREET ADDRESS <td></td> <td>  P   WOLESON LOUIS III</td> <td></td> <td></td> <td></td> <td>L Change L Addition</td>		P   WOLESON LOUIS III				L Change L Addition
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NAME     52 NAME       STREET ADDRESS     53 STREET ADDRESS       CTY - S1 - ZIP     54 CTY - ST - ZIP       DTLE     61 TITLE       DELETE     61 TITLE       OF Y - ST - ZIP     Change       Addition       NAME       STREET ADDRESS       CTY - ST - ZIP       DELETE       61 TITLE       STREET ADDRESS       CTY - ST - ZIP       CTY - ST - ZIP       G1 TY - ST - ZIP       14. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information supplied with the site and accurate and that my signature shall have the same legal effect as if made under oath; that I am on chacer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name	NAMe       52 NAME         STREET ADDRESS       53 STREET ADDRESS         CEY 51-7P       54 CITY-ST-ZIP         DILE       61 TITLE         MAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY-ST-ZP       64 CITY-ST-ZIP         DILE       61 TITLE         MAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY-ST-ZP       64 CITY-ST-ZIP         14. T do hereby certify that the information suppled with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that Lam an othere or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.	THE NAME STRCE: ADDRESS CUTY-SS ZP THE NAME		DELETE	3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4. 2 NAME	·	
STREET ADDRESS       53 STREET ADDRESS         CTY (51-7) <sup>0</sup> 54 CiTY-ST-ZIP         DILE       61 TiTLE         MME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY (51-7) <sup>0</sup> 64 CiTY-ST-ZIP         MAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY (51-7) <sup>0</sup> 64 CiTY-ST-ZIP         14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	STREET ADDRESS       53 STREET ADDRESS         CTY (51-7) <sup>2</sup> 54 CITY - ST-ZIP         DILE       61 TITLE         DELETE       61 TITLE         OTY (S1-7) <sup>2</sup> Change         MAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY (S1-7) <sup>2</sup> 64 CITY - ST-ZIP         IT       Change       Addition         NAME       63 STREET ADDRESS         CITY (S1-7) <sup>2</sup> 64 CITY - ST-ZIP         IT       I do hereby certify that the information suppled with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an othere or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.	THE NAME STECE ( ADDRESS CUTY-ST ZO TELE NAME STREET ADDRESS CUTY-ST ZO			3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		Change Addition
CFY-S1-7P       54 CFY-ST-ZIP         Intuit       DELETE         61 TrifLE       61 TrifLE         MAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CHY-S1-7P       64 CHY-ST-ZIP         14. Lick hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	CITY-SI-7P       54 CITY-SI-7P         Intu-       DELETE         6 1 TITLE       6 1 TITLE         NAME       6 2 NAME         6 3 STREET ADDRESS       6 3 STREET ADDRESS         CITY-SI-7P       6 4 CITY-SI-7IP         14. T do hereby certify that the information suppled with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an other or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.	THE NAME STELLE ADDRETS CETY - STI ZET TELE NAME STREET ADDRETS CETY - STI ZET TOLE			3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME     62 NAME       STREET ADDRESS     63 STREET ADDRESS       CITY: ST-ZP     64 CITY: ST-ZIP       14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information or supplemental annual report is true and cocurate and that my signature shall have the same legal effect as if made under oath; that I am on other or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name	NAME       62 NAME         STREET ADDRESS       63 STREET ADDRESS         CITY: S1-20*       54 CITY-ST-ZIP         14. I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certily that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an other or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.	THE NAME STECT ADORETS CITY-ST ZP TELE NAME STREET ADDRETS CITY-ST ZP TULE NAME			3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS 63 STREET ADDRESS CITY: S1-20 64 CITY: ST-20  14. 1 do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an other or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	STREET ADDRESS  CITY: S1-29  6.3 STREET ADDRESS  6.4 CITY: S1-29  14. I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.	THE NAME STECT ADDRETS CITY-ST 20 TELE NAME STREET ADDRETS CITY-ST-20 THEF NAME STREET ADDRETS CITY-ST-20		DELETE	3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		Change Addition
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