## FILED

2002 UNIFO	RM BUSINES	May 29, 2002 8:00 am	
DOCUMENT #  1. Entity Name ETCUNLIMITED, INC.	H33784		Secretary of State 05-29-2002 90693 022 ***150.00

ONLIMITED, INC.				
V 88TH ST.	Mailing Address 10637 SW 88TH ST. STE. 7G MIAMI FL 33176 US			
pal Place of Business	3. Mailing Address			
Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE
State	City & State		4. FEI Number 50-2535048	Applied For
Country	Zip	Country	5. Certificate of Status Desired	Not Applicable  \$8.75 Additional
6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Registered	Fee Required
) CARING A		≥ Name		
S.W. 88TH STREET		Street Addres	ss (P.O. Box Number is Not Acceptable)	
		1	FL.	Zip Code
ove named entity submits this statement t	or the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida.	
RE		NO.	DOSERT 4/10	2/07
		E: Registered Agent signature requ	ured when reinstating) CATE	700
ng requirement and elects to do so.	After May 1, 20	02 Fee will be \$550.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
OFFICERS AND		12.		ı
OTERO, CARLOS A. 7554 S.W. 113 COURT MIAMI FL 33173	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change Addition
V OTERO, BARBARA G. S 7554 S.W. 113 COURT MIAMI FL 33173	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP		☐ Change ☐ Addition
	☐ Delete	TITLE		Change Addition
3.	مُصِحَمُ عَلَيْ وَ كَالْ الْكَالِيَّةِ	STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·
S	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. [	Change Addition
	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	C	Change Addition
,	☐ Delete	TITLE NAME		Change
	8. Name and Address of Currer  2), CAPLOS A. S.W. 88TH STREET  G FL 33176  Ove named entity submits this statement of separative, typed or printed name of registered agent proporation is eligible to satisfy its Intangible or grequirement and elects to do so.  OFFICERS AND  OFFICERS AND  P OTERO, CARLOS A. 7554 S.W. 113 COURT  MIAMI FL 33173  V OTERO, BARBARA G. 7554 S.W. 113 COURT	Place of Business  Well ST.  10837 SW BBTH ST.  33176  JAMM FL 33176  State  Country  Zip  6. Name and Address of Current Registered Agent  Country  Zip  6. Name and Address of Current Registered Agent  Cove named entity submits this statement for the purpose of changing its submits in the statement for the purpose of changing its submits in the statement and the Applicable.  Departure, typed or proted name of registered agent and the Applicable.  Proporation is eligible to satisfy its Intangible agrequirement and elects to do so.  Make Check Payat  OFFICERS AND DIRECTORS  POTERO, CARLOS A.  S. 7554 S.W. 113 COURT MIAMI FL 33173  V Delete  Delete  Delete  Delete	Place of Business  Welth ST.  10537 SW 88TH ST.  STE. 76 MMM FL 33178  Dal Place of Business  3. Mailing Address  US  Dal Place of Business  3. Mailing Address  4. Apt. 4, etc.  Country  Country  2. Delete  Dal Country  2. Delete  The Street Address  Address  City St. 13 Country  After May 1, 2002 Fee will be \$550.00  After M	Place of Business  Mailing Address  (#8TH \$T. 10677 SW #8TH \$T. 5TE 76  MalMAR FL 33176  Dail Phace of Business  3. Mailing Address  Str. 76  MalMAR FL 33176  Do NOT WRITE IN THIS S  State  Country  State  Country  2. Mailing Address  State  Cry & State  Cry & State  Country  5. Certificate of Status Desired  Country  8. Marma and Address of Current Registered Agent  7. Marma and Address of New Registered  Name  Assume and Address of Current Registered Agent  7. Marma and Address of New Registered  Street Address (P.O. 3ox Number is Not Acceptable)  The City  FL  City

Indicated on this report or supplemental 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SUMMING OFFICER OR DIRECTOR

On the security that the information security is signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

Description 19.0/(3)(f), Florida Statutes. I further certify that the information 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 11 or Block 12 if OR SIGNATURE.

SIGNATURE:

Description 19.0/(3)(f), Florida Statutes. I further certify that the information 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 11 or Block 12 if OR SIGNATURE.

Description 19.0/(3)(f), Florida Statutes. I further certify that the information of the corporation of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information of the corporation 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 11 or Block 12 if OR Bl

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