

FILED

100-443887-1000

3. Date Incorporated or Qualified 12/02/1987	3a. Date of Last Report 04/12/1996			
4. FEI Number 59-2869616	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: center;"> Applied For Not Applicable </td> </tr> </table>		Applied For Not Applicable	
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required			
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees			
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
10. Name and Address of New Registered Agent				
(P.O. Box Number is Not Acceptable)				
FL	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%; text-align: center;">85</td> <td style="width: 80%;">Zip Code</td> </tr> </table>	85	Zip Code	
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Corporation submits this statement for the purpose of changing its registered agent's board of directors. I hereby accept the appointment as registered agent.				
(Date when reinstating) _____ DATE _____				
ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"></td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Change</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Addition</td> </tr> </table>			<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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I am in Section 119.07(3)(i), Florida Statutes. I further certify that the signature shall have the same legal effect as if made under oath; that it is as required by Chapter 607, Florida Statutes; and that my name is <u>Selem Torres</u>				
Date	Daytime Phone #			

CR2E034 (9/96)