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14. I 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 an annual report of 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 annual report of 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 annual report of 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 annual report of 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 annual report of 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 annual report of 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 annual report is true and accurate and that my signature shall have the same legal effect.	1. Pursuant t office or re agent. I ar SIGNATURE 12. ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS	to the provisers of Sec egistered soft, or both m familiar with and acc Signature. typed or printed name PD MIHAILESCU, SIMO 155 HAMMON AVE	tions 607.0502 and 60 , in the State of Florida ept the obligations of, i of Pasisfered agent and title if OFFICERS AND DIREC	applicable. (NOTE: CTORS DELETE DELETE DELETE DELETE DELETE DELETE	B4 City s, the above-named corporation thorized by the corporation da Statutes. Registered Againt signature requir 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 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 6.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	ed when reinstating)	FICERS AND DIRECTOR Change Change Change Change Change Change	RS IN 12 Addition