| DOCUMENT # L00000015612 | | | | | |
|-------------------------------|--|--|---------------------------------------|---|---|
| • | i international trading, i | щс | | FILED SECRETARY OF STATE DIVISION OF CORPORATIONS | |
| Principal Plac | ee of Business | Mailing Address | | 01 NOV 26 PM 4: 15 | |
| 325 MERIDIAI MIAMI BEACH | N AVENUE, SUITE 6 H EL 33139 | 325 MERIDIAN AVENUE, SUITI MIAMI BEACH FL 33139 | E 6 | 01 404 50 111 | |
| MICHII DENOI | 1112 00700 | | | | |
| 0 O-111 D | No. of Decisions | | | | |
| 7as | Place of Business ACACIOL RO. | 3. Mailing Address ACAC | ia.Kd. | T INDIVIDIT DEL DOLLI BOLLI BOLLI DOLLI DOLLI BOLLI DOLLI BELLO LIDOL BILLO BILLO BILLO BILLO BILLO BILLO | |
| Suite, Apt. | #,etc 2 | Suite, Apt, #, etc. | • | DO NOT WRITE IN THIS SPACE | |
| City & Stat | Cool M | City & State | V, | 4. FEI Number OF 8/3 6 Applied For Not Applicable | |
| Zip 2 - | Country I CA | Vero 19each | Country LICA | \$5.00 · · · · · · · · · | |
| 3 | 1463 USH | 30/163 | MA WA | 5. Certificate of Status Desired Fee Required | |
| | 6. Name and Address of Current F | Registered Agent | - Name -/- | 7. Name and Address of New Registered Agent | 2 |
| GF | RANITUR, ERIC | | Street Addres | rss (P.O. Box Alumber is Not Acceptable) | |
| | 5 MERIDIAN AVENUE, SUITE 6 AMI BEACH FL 33139 | | 16 | ss (P.O. Box Alumber is Not Acceptable). Suite 3 | |
| | | | City Ven | o Beach FL Zip Cod 32163 | |
| 8. The above | e named entity submits this statement for | the purpose of changing its regi | stered office or regis | istered agent, or both, in the State of Florida. | |
| SIGNATURE | En Drita | ERIC GRAN | | 11/19/01 | |
| - | Signature, typed or printed name of registered agent a | | istered Agent signature requ | | |
| • | | FILE NOW Make Check Payab | !!! FEE IS \$50.0 le to Department | · · · · · · · · · · · · · · · · · · · | |
| : | | | ptember 26, 2001 | | |
| 9. | MANAGING MEMBER | | 10. | ADDITIONS/CHANGES | |
| TITLE NAME | CHIAZ KILEGER | 3/5 | TITLE NAME | Change Addition | |
| STREET ADDRESS | 725 ACACIA ROFK |), 3 c//E = | STREET ADDRESS | 5083 | |
| CITY-ST-ZIP | VERO BEACH, EC | Delete | CITY-ST-ZIP TITLE | Change Addition | |
| NAME | | □ Delete | NAME | | |
| STREET ADDRESS CITY-ST-ZIP | · | | STREET ADDRESS CITY-ST-ZIP | 5000047179068 -12/11/0101016014 ****150.00 ****150.00 | |
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| NAME | | | NAME | | - |
| STREET ADDRESS CITY-ST-ZIP | : | | CITY-ST-ZIP | | |
| TITLE | | ☐ Delete | TITLE | Pein 100 Change Addition UBR 50 150. Margane Addition | |
| NAME STREET ADDRESS | | | NAME STREET ADDRESS | Kein 100 | |
| CITY-ST-ZIP | | | CITY-ST-ZIP | 0BR 80 | _ |
| TITLE NAME | | ☐ Delete | TITLE NAME | 150 MC Change Addition | |
| STREET ADDRESS | | _ | STREET ADDRESS | | |
| CITY-ST-ZIP | REINSTATE | MENT 21 | CITEST-216 | Change Classica | |
| TITLE NAME | WEIMO IVI FI | Delet Delet | NAME . | ☐ Change ☐ Addition | |
| STREET ADDRESS | | | STREET ADDRESS | | |
| 11. L bereby | certify that the information supplied with | this filling does not qualify for the | CITY-ST-ZIP exemption stated in | n Section 119.07(3)(i), Florida Statutes. I further certify that the information | |
| indicated | on this report is true and accurate and ability company or the receiver or trustee | that my signature shall have the : | same legal effect as | s if made under oath; that I am a managing member or manager of the | |

SIGNATURE: ESPATHET REALIZATION REPRESENTATION 1119/01 561-492-0079

2001 UNIFORM BUSINESS REPORT (UBR)

1240 x