DOCUI	MENT # M63814 BLE "C", INC.	RT (UBR	Apr 19, 2001 08:00 AM Secretary of State							
Principal Plac 700 UNIVERSE JUNO BEACH 33408		Mailing Address ATTN: RITA W. COSTANTINO 700 UNIVERSE BLVD JUNO BEACH 33408		FL							
2. Principal P	Place of Business	3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State	te	City & State				FEI Number 5-0024937			——————————————————————————————————————	applied For]
Zip	Country	Zip	Country	У		Certificate of Sta	tus Desired		\$8.75 Ac	dditional	-
	6. Name and Address of Current F	Registered Agent			7. 1	Name and Addr	ess of New F				1
LEON 9250 WEST	J E FLAGLER STREET			Name Street Ad	dress (P.O. É	ox Number is No	ot Acceptable	· •)		<u> </u>	
MIAMI 33174	US		-	City			-	FL	Zip Co	 de	•
O. T	named entity submits this statement for			<u>-</u>		_ <u></u>	41				1
Tax filing r	Signature, typed or printed name of registered agent a praction is eligible to satisfy its Intangible requirement and elects to do so, ria on back)	FILE NOW!!! After MAY 1, 2001 Make Check Payable	FEE IS	\$ \$150.0 (ii) be \$55	0.00	10. Election	Campaign Fit d Contributio		\$5.0	00 May Be	- Indiana de la companya de la compa
11.	OFFICERS AND I	DIRECTORS	12.		ΑD	DITIONS/CHAN	GES TO OFF	ICERS AND	DIRECTOR	RS IN 11	1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS HATHAWAY SCOT C 700 UNIVERSE BLVD JUNO BCH	Delete FL 33408	TITLE NAME STREET CITY-S	ADDRESS T-ZIP					☐ Change	☐ Addition	E034 (11/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TANCER EDWARD F 700 UNIVERSE BLVD JUNO BCH	Delete ,	TITLE NAME STREET CITY-S	ADDRESS T-ZIP					☐ Change	Addition	CR2E
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SAMIL DILEK L 700 UNIVERSE BLVD JUNO BCH	☐ Delete FL 33408	TITLE NAME STREET CITY-S	ADDRESS T-ZIP	DT MCGRATH 700 UNIVE JUNO BCH	RSE BLVD	ſ L	 FL	X Change 33408	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HOFFMAN KENNETH P 700 UNIVERSE BLVD JUNO BCH	☐ Delete FL 33408	TITLE NAME STREET CITY-S	ADDRESS T-ZIP	DV LEIGHTON 700 UNIVE	RSE BLVD	L L	FL	Change	☐ Addition	<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS COSTANTINO RITA W 700 UNIVERSE BLVD JUNO BCH	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS					☐ Change	☐ Addition	!
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP YACKIRA MICHAEL 700 UNIVERSE BLVD JUNO BCH	Delete	TITLE NAME	ADDRESS	DP HAY III 700 UNIVE					Addition	
of the cor	certify that the Information supplied with on this report or supplemental report is poration or the receiver or trustee emporation, or on an attachment with an address, w	this filing does not qualify for the true and accurate and that my wered to execute this report as	ne exem	ption state	d in Section	119.07(3)(i), Flor		I further cert	ify that the	e or disaster	
SIGNAT		NO NINTED NAME OF SIGNING OFFICER OR	DIRECTO	R	A		19/2001 Date	Da	ytime Phone #		

Daytime Phone #