2006 FOR PROFIT CORPORATION

DOCUMENT # M66056 TIME ENTERPRISES, INC. FILE D O6 MAR - 27 Hz 30 SECTE TALLAR TAL		AMENDED AND	TOAL REPUR	()		_					
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City & State Country S. Certificate of Status Desired See, 7A Additional Fee, Requised State Address of New Registered Agent Name Street Address of New Registered Agent Name Street Address of New Registered Agent City & FL Zip Code City	Principal Place of Business 3. Mailing Address				alifornik di la					Č.	
Specification of Status Desired Security Specification Specification Security Specification Spec	Suite, Apt. #, etc.		. Suite, Apt. #, etc.		02212006	· Chg-P	CR2E0	34 (11/05)			
S. Certificate of Status Desired \$5. Certificate of Status Desired \$6. Name and Address of Current Registered Agent \$7. Name and Address of New Registered Agent	City & State		City & State								
ESOUENAZI, JULIO 2500 S.W. 107TH AVENUE \$ine above named onthly submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligation of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligation of the obligation of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligation of the	Zip					5. Certificate	of Status Desired				
ESCUENAZI, JULIO 2500 S.W. 107TH AVENUE STE 5 M/AMI, FL 33165 City FL Zip Code		6. Name and Address of Current		7. Name and	Address of New I	Registered A	lgent				
2500 S.W. 107TH AVENUE STEE 5 M/AMI, FL 33165 Site above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. It am familiar with, and accept the obligation of the ob	ESOUENA	ZL JULIO			Name						
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B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. It am familiar with, and accept the obligations of registered agent. Common	MIAMI, FL 33165										
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		ertify that the information supplied with	this filing does not qualify for			d in Chanter 11	9. Florida Statutes	L further cert	ify that the in	formation	

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. 0ate Oaysine Phone 8

SIGNATURE:

RESIDENT SIGNING OFFICER OR DIRECTOR