

**FILED**  
**Aug 05, 2005 8:00 am**  
**Secretary of State**

DOCUMENT # N03000009415

**Mailing Address**  
**3883 N.W. 207TH STREET ROAD**  
**MIAMI, FL 33055**

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

Zip

Country

CR2E037 (10/03)

Applied For
Not Applicable

☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

**Make check payable to  
Florida Department of State**

11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
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TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

TITLE	Vice President	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Brinson, Claudette		
STREET ADDRESS	3908 NW 213 ST		
CITY-ST-ZIP	Miami FL 33055		

TITLE	Sec.	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Brown, mitch		
STREET ADDRESS	3937 NW 207 St. Rd.		
CITY-ST-ZIP	Miami, FL 33055		

TITLE	Treas.	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Duarte, Leonel		
STREET ADDRESS	21405 NW 39 Ave		
CITY-ST-ZIP	Miami, FL 33055		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**SIGNATURE:**

Nathaniel Miller

7-2-65

305-625-5590

Date \_\_\_\_\_

Daytime Phone #