2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCLIMENT # NOSOOOOAQ78 A THE ROOM

FILED Jul 21, 2006 8:00 am Secretary of State 07-21-2006 90029 012 ****61.25

Principal Place of Business C/O JOSE FUENTE SLOG SAN REMO AVENUE, SUITE 400 CORAL GABLES, FL 33134 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country Zip Country S. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WATTS-FITZGERALD, ABIGAIL C C/O HUNTON & WILLIAMS LLP 1111 BRICKELL AVENUE, SUITE 2500 MIAMI, FL 33131 City Filling Fee is \$61.25 Pilling Fee is \$61.25 Pilling Fee is \$61.25 Pilling Fee is \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE MAKE SIREEL ADDRESS Direct Cor Delete MAKE SIREEL ADDRESS Mailing Address C/O JOSE FUENTE C/O ORAL GABLES, FL 33134 A \$1300 O7122006 Chg-NP CR2E037 (4/06) Applied For 20-34 59 080 PO122006 Chg-NP CR2E037 (4/06) Applied For 20-34 59 080 No Applicable 20-34 59 080 No Applicable To Norme 7. Name and Address of New Registered Agent Norme City Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) Titus Fund Contribution Added to Fees Make Check payable to Florida Department of State 10. OFFICERS AND DIRECTORS In 10 Make Street Modess SIREEL MORESS SIREEL MORES			I, INC.			• • • • • • • • • • • • • • • • • • • •		
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. O7122006 Chg-NP CR2E037 (4/06) City & State City & State City & State Country Zip Country Zip Country Siphility Country Sireet Address of Status Dasired Fee Required 6. Name and Address of Current Registered Agent Name WATTS-FITZGERALD, ABIGAIL C C/O HUNTON & WILLIAMS LLP 1111 BRICKELL AVENUE, SUITE 2500 MIAMI, FL 33131 City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, reped or proved name of registered agent and after if applicable. (NOTE Registered Agent signature required when reinstating) Due by September 6, 2006 Public Policies AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TILE NAME SIRRET ADDRESS NAME SIRRET ADDRESS SIRRET ADDRESS NAME SIRRET ADDRESS NAME SIRRET ADDRESS SIRRET	C/O JOSE FUENTE 1500 SAN REMO AVENUE, SUITE 400		C/O JOSE FUENTE 1500 SAN REMO AVENUE, SUITE 400					
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12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, 1 further certify that the information	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Coral Gables, FL 33 Director Fuente, Jose E. 1500 San Remo Avenu Coral Gables, FL 33 Director Krutulis, John W. 1500 San Remo Avenu Coral Gables, FL 33 Director Bartel, Jeffrey 1500 San Remo Avenu Coral Gables, FL 33 Director Milford, Ted 1500 San Remo Avenu	Delete Delete	CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	Addition Addition	

of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, 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.

SIGNATURE:

E Fresto SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305) 667-5480 Daytime Phone #