04-24-2006 90387 030 ****61.25         04-24-2006 90387 030 ****61.25         04-24-2006 90387 030 ****61.25         1 Country Colspan="2">04-24-2006 90387 030 ****61.25         1000 57145         1000 57145         1000 57145         2000 57145         200 Country         200 Country         200 Country         200 Country         1 Manne and Address of Current Registered Agent         Name and Address of New Registered Agent	- 20	06 NOT-FOR-PI ANNUA	ROFIT ( L REP(	CORPOF ORT	RATION		Apr See	FIL 24, 20 cretary	06 8:0	0 am ite
DIUS BLUU TAMPA, FL 33006       TAMPA, FL 33006         2. Pincipal Place of Business       A. Maling Address         Suite, Apt. F. dC.       Suite, Apt. F. dC.         City & State       City & State         City & State       Country         B. Name and Address of Current Registered Agent       7. Name and Address of Surrent Registered Agent         WATKINS, NANCY 610 S BLVD       Street Address of Current Registered Agent       7. Name and Address of Name Registered Agent         Street Address of Hourse Registered Agent       Name       7. Name and Address of Name Registered Agent         WATKINS, NANCY 610 S BLVD       Street Address of Hourse Registered Agent A	1. Entity Nam FOUNDA	e		TION FUND,			04-	24-2006 9038′	7 030 ****61	.25
Suite. Apl. 4, etc.       2272006       Chy AP       CR2E037 (11105)         City & State       City & State       4. FEI Number 20 - 322 29 285       In Applied 7 Not Applied 7 20 - 322 29 285       In Applied 7 Not Applied 7 Not Response         Zip       Country       Zip       Country       Set State       4. FEI Number 20 - 322 29 285       In Applied 7 Not Applied 7 Not Response         WATKINS, NANCY 610 S BLVD       -       Name       Name       Name       Set Address of New Registered Applied 7         Steel Address of New Registered Applied City       FL       Zip Code       Name       Name         Steel Address of RPD About State of Plotta. Statement for the purpose of changing its registered affica or regamed applications applicating applicat	610 S BLVD 610 S BLVD									
City & State     City & State     A FER Normer     Applied     Cut2Eb3 (1705)       Zip     Country     Zip     Country     State     A FER Normer     Applied     Name       20     Country     Zip     Country     State     State     State     State     State       20     Country     Zip     Country     State     State     State     State     State       20     Country     Zip     Country     State     State     State     State     State       WATKINS, NANCY     State     Name     Name     Name     Name     State	2. Principal Place of Business 3. Mailing Address									
Zip       Country       Zip       Country       Init Applied         20       -3.229.285       Init Applied         4. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         WATKINS, NANCY       Name       Seet Address of New Registered Agent       7. Name and Address of New Registered Agent         WATKINS, NANCY       Seet Address of New Registered Agent       Name       Seet Address of New Registered Agent         City       FL       Zip Code       Seet Address of New Registered Agent       Name         City       FL       Zip Code       Seet Address of New Registered Agent       Name         Statutores       City       FL       Zip Code       Seet Address of New Registered Agent         City       FL       Zip Code       Seet Address of New Registered Agent       Name         Statutores       Intit Agent       Seet Address of New Registered Agent       Name and Address of New Registered Agent         City       FL       Zip Code       Seet Address of New Registered Agent       Name and Address of New Registered Agent         Statutores       Intel Code New Registered Agent       Intel Registered Agent A	Suite, Apt.	#, etc.	Suite,	Suile, Apt. #, etc.			02272006 Chg-NP CR2E037 (11/05)			
Zip       Country       Zip       Country       s. Certificate of Shutz Dealed       F8.75 Acational         .e. Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       7. Name and Address of New Registered Agent         WATKINS, NANCY       Name       Name       Name and Address of New Registered Agent         TAMPA, FL 33606       Stet Address (PO Box Number is Not Acceptable)       Name         City       FL       Zip Code         A. The above named only submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Tem familiar with, end ac the obligations of registered agent.       Tem Earlier agent       Maile Check payable to the obligations of registered agent.         SIGNATURE       True Fund Controlution.       \$5.00 Nary 9e       Maile Check payable to the obligations of registered Agent agent meand dwa meand dwa meand dwa meand with restrict of State of Florida. Tem familiar with, end ac the obligations of registered agent.       State Address (PO Box Number is Not Acceptable to Florida Repartment of State of Florida Repartment of Sta	City & State	2	City 8	City & State						
WATKINS, NANCY 610 S BLVD TAMPA, FL 33GOG     Name       Steel Address (PO Box Number is Not Acceptable)       City     FL       City     FL       City     FL       City     FL       City     FL       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       City     FL       Steel Address (PO Box Number is Not Acceptable)       Steel Address (PO Box Number is Not Acceptable)	Zip				Country		5. Certificate of Status Desired Status Desired Fee Required			
610 S BLVD       Sieel Address (P.O. Box Number is Not Acceptable)         City       FL       Zip Code         Signation of the particle agent.       City       FL         Signation of the particle agent.       City       FL       Zip Code         Signation of the particle agent.       City       FL       Make check payable to particle agent.         Signation of the particle agent.       City       FL       Make check payable to particle agent.         Signation of the particle agent.       City       FL       Make check payable to particle agent.         Signation of the particle agent.       City       Pressident       City       City City City City City City City City			ent Registered /	Agent	Name		7. Name and Add	ress of New Regist	ered Agent	
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and ac the obligations of registered agent.     SIGNATURE  Signatus speed or processing agent agent agent agent agent are test fapocable.  Filing Fee is 561.25 Due by May 1, 2006  OFFICERS AND DIRECTORS  II.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  Trust Fund Continue of magnetic data family agents agent agent agent agent agent agent agent agent.  Register Adget a gent agent a	610 S BLVD				Street Address (P.O. Box Number is Not Acceptable)					
the caligations of registered agent.  SIGNATURE  Signature typed or or reference of registered agent and tax 4 coucase.  (MCE: Regenered Agent System Regret deer internation)  Filing Fee is \$61.25 Due by May 1, 2006  Filing Fee is \$61.25 Definition  OFFICERS AND DIRECTORS  It and Contribution  OFFICERS AND DIRECTORS  It and Contribution  OFFICERS AND DIRECTORS  It and Contribution  Definition  Definition  Definition  OFFICERS AND DIRECTORS  It and Contribution  Definition  It and Contribution  Definition  It and Contribution  It an					City				FL Zip Cod	e
Inte       Inte       Inte       President       Inte       Inte         WWE       SREF ADDRESS       GTY-ST-2P       Fort Lauderdale, FL 33308       Change       Inte         WWE       Inte       Inte       Fort Lauderdale, FL 33308       Change       Inte         WWE       Inte       Inte       WWE       SREF ADDRESS       Fort Lauderdale, FL 33308       Change       Inte         WWE       Inte       Inte       WWE       SREF ADDRESS       GTY-ST-2P       Fort Lauderdale, FL 33308       Change       Inte         WWE       Inte       Inte       WWE       SREF ADDRESS       GTY-ST-2P       Fort Lauderdale, FL 33308       Change       Inte         WWE       Inte       Inte       WWE       Sergio Pino       Sergio Pino       Sergio Pino       Totage       Max         STRET ADDRESS       GTY-ST-2P       Inte       Miamui, FL 33126       Change       Inte         WWE       Inte       Inte       Inte       Secretary       Inte		Filing Fee is \$61.25 Due by May 1, 2006		9. Election Camp	paign Financing Intribution. [		\$5.00 May Be Added to Fees	Make Florida D	check payable t Department of S	tate
NAME       NAME         STREET ADDRESS       CTY-ST-2P         TITLE       Delete         NAME       STREET ADDRESS         CTY-ST-2P       CTY-ST-2P         STREET ADDRESS       STREET ADDRESS         CTY-ST-2P       CTY-ST-2P         TTLE       MAME         NAME       STREET ADDRESS         CTY-ST-2P       CTY-ST-2P         TTLE       Delete         NAME       STREET ADDRESS         CTY-ST-2P       CTY-ST-2P         TTLE       MAME         STREET ADDRESS       CTY-ST-2P         TTLE       MAME         STREET ADDRESS       CTY-ST-2P         TTLE       Delete         TTLE       MAME         STREET ADDRESS       CTY-ST-2P         TTLE       Delete         TTLE       Delete         TTLE       Delete         TTLE       Delete         TTLE       Delete         STREET ADDRESS       CTY-ST-2P         TTLE       Delete         TTLE       Delete         TTLE       Delete         TTLE       Delete         TTLE       Delete	TITLE NAME STREET ADDRESS	OFFICERS AND	DIRECTORS	Delete	TITLE NAME STREET ADDRESS	Pre Zac 472	esident ch Zacharia 25 N Feder	h al Highway	Change	Addition
NWKE STREET ADDRESS CITY-ST-2P     NWKE STREET ADDRESS CITY-ST-2P     Sergio Pino 7270 SW 12th Street       TITLE     Delete     ITLE     Miami, FL 33126     Change       NWKE STREET ADDRESS     STREET ADDRESS     CITY-ST-2P     CITY-ST-2P       TITLE     Delete     ITLE     MAKE STREET ADDRESS     CITY-ST-2P       CITY-ST-2P     CITY-ST-2P     CITY-ST-2P     CITY-ST-2P       TITLE     Delete     ITLE     Change     XA       STREET ADDRESS     CITY-ST-2P     CITY-ST-2P     CITY-ST-2P       TITLE     Delete     ITLE     Street ADDRESS     CITY-ST-2P       TITLE     Delete     The street approximation supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statules. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statules. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statules. I further certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statules. I further certify that the information of the creciver or trustee empowered to execute this report as required by Chapter 617. Florida Statules. I further certify that the information chapter or due 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 chapted (or on an attachment with an address, with all other like empowered	NAME Street address			Delete	NAME STREET ADDRESS	FOI	rt Lauderda	(1e, FL 3:	5308 Change	Addition
Inte       Delete       Inte       Delete       Inte         NAME       STRET ADDRESS       GTY-ST-2P       GTY-ST-2P         ITLE       Delete       Till.E       Secretary       Change       MA         NAME       Delete       Till.E       Secretary       Change       MA         STRET ADDRESS       GTY-ST-2P       GTY-ST-2P       Socretary       Change       MA         NAME       Thomas F. Petway       Socretary       Socretary <td>Name Street address</td> <td></td> <td></td> <td>Delete</td> <td>NAME STREET ADDRESS</td> <td>Sei 721</td> <td>rgio Pino 70 SW 12th</td> <td>Street</td> <td>Change</td> <td>X Addition</td>	Name Street address			Delete	NAME STREET ADDRESS	Sei 721	rgio Pino 70 SW 12th	Street	Change	X Addition
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indicated on this report or supplemential 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 dire 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 changed, or on an attachment with an address, with all other like empowered.	NAME STREET ADORESS			Delete	NAME STREET ADDRESS			, <del>1</del>	Change	Addition
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Destrice Phone #	SIGNAT	URE: UNIT SIGNATURE AND TYPED	OR PRINTED NAME (	- SIGNING OFFICER OF	RDIRECTOR		414			67

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