2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N9400000153 1. Entity Name GRACES OF AMERICA, INC.

FILED May 11, 2001 8:00 am Secretary of State 05-11-2001 90306 042 ****70.00

| REON SW 197TH COURT STE. A MAMI FL 30183 2. Principal Pilece of Business 3. Mailing Address Suite. Apr. # etc. Coy & State City & State Country 2. Do Country 3. Certificate of Status. Specied 5. Certificate of Status. Specied 6. Name and Address of Current Registered Agent MANTILLA, GILBERTID 6. Name and Address of Current Registered Agent MANTILLA, GILBERTID 6. Name and Address of Current Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent MANTILLA, GILBERTID 6. Name and Address of Name Registered Agent 6. Name and Address of Name Registered Agent 6. Name and Address of Name Registered Agent 7. Name and Address of Name Registered Agent 6. Name and Address of | Principal Place of Business | | | Mailing Address | | | | | | | |
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| 2. Principal Place of Business Suite, Apt. #, etc. City & State City | | | | | | | | •#1000 | 000 | | |
| Surfa, Apt. 4, etc. Cey & State City & State Country Coun | \$ · | | | | | | | ALE CONTRACTOR DESCRIPTION TO | in and low rose use | I DIIG INI INI | |
| City & State See Trigger Status Desired See Trigger State MANTILLA, GILBERTO Street Address of Current Registered Agent Name MANTILLA, GILBERTO Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 8. The above named entity submits this statement for the burpose of changing its registered affice or registered agent, or both, in the state of Fioricia. SIGNATURE FILE NOW: FILE | 2. Principal F | Place of Busin | ess | 3. Mailing Address | | - | | | | | |
| Country Zip Country S. Certificate of Status Desired See Replacable See Replaca | Suite, Apt. | . #, etc. | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | |
| S. Harme and Address of Current Registered Agent Name MANTILLA GILBERTIO 6601 SW 137TH COURT-STE. A MINAMI R. 33183 Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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. SIGNATURE FILE NOW: FEE IN SEC. 25 FILE NOW: FEE IS \$61.25 FULL PROVIDE TO Be Street Address (P.O. Box Number is Not Acceptable) Fee Required Name Street Address of New Registered Agent City FL Zip Code 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. FILE NOW: FEE IS \$61.25 FULL PROVIDE TO BE STREET ADDRESS (P.O. Box Number is Not Acceptable) Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Name Street Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Required Name Registered Agent Fee Required Fee Required Fee To Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Required Fee Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Required Fee Required Fee Required Fee Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Required Fee Address (P.O. Box Number is Not Acceptable) Fee Required Fee Required Fee Required Fee Required Fee Req | City & Star | te | · : | City & State | | | GE_O/E0761 | | | | |
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| 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. Signature | | | JRT-STE. A | | | | | | | è | |
| SIGNATURE Signature Signa | | | | | City | | | • | FL Zip Co. | de et | |
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indicated on this report or supplied with this tiling does not quality for the exemption stated in section 19.07(3)(i), Florida Statutes. Therefore the first flat I am an officer or director 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 actions, with all other like empowered.

SIGNATURE

MANTILLA, Gilberto 4.24.0/ 305-B Date Devime Prope #