200	I UNIFORM BUS	NESS REPO	RT (UB	R)	1/30 Ma	$ay 18, \overline{2}$	LED 2001	8:00 a	am
DOCUMENT # P0000039731 1. Entity Name CLAVIER CORP.					Secretary of State 01-30-2001 90028 028 ***150.00				
			: .		•				
Principal Place 169 E. FLAGLE GUITE 1527 MIAMI FL 3316		Mailing Address 400 S. FLACLER STREET CHITE 4523 MANS FL 00401	·		Ligaritati in Adala A			H M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Place of Business	3. Mailing Address	ive						
Suite, Apt.		Suite, Apt. #, etc.! Suite No. 126	146		DC	NOT WRITE IN TH	IS SPACE		
City & Sta		City & State Beach	ı FL		4. FEI Number 65	100629	72 A	oplied For	
Zip 3344	Country	Zip	Country		5, Certificate of Status		\$8.75 Ad	ditional	
	6. Name and Address of Current I			 -	7. Name and Addres		ed Agent		
THO	MPSON, DISNEY		Name Street A	Address (P.	CE Sherm. O. Box Number is Not				
	e. Flagler Street . T-1527 -								
	## FL 9919+		City (state Road ut Creek	<u>+</u>	Zip Cod	33073	
8. The above	named entity sybmits this statement for	the ourcose of changing its re	egistered office o				<u> </u>	320	
SIGNATURE	Signature, by peed or printed name of registered agent a	san	Registered Agent signs	, . <u> </u>	** **. *	OJ/IA	1/2001		,
Tax.filing	oration is eligible to satisfy its Intangible requirement and elects to do so	FILE NOW!!! After MAY-1, 200 Make Check Payable		550.00	Trust Fund	mpaign Financing Contribution.	\$5.0 Added	O May Be	
11.	OFFICERS AND I	DIRECTORS	12.		ADDITIONS/CHANG	ES TO OFFICERS A	,		≘
TITLE · NAME STREET ADDRESS	D CLAVIER BENITEZ, LEONARDO 160 5. FLAGLER STREET SUITE	☐ Delete	TITLE NAME STREET ADDRESS	Chris	er Bealtez Leo way brive. Swith ield Beach. F	nardo No. 126	Change	☐ Addition }	034 (10/00)
CITY-ST-ZIP	MIAMI FL 33131	По	CITY-ST-ZIP.	Deen	ield Beach, F	L- 33441	Change		CRZEC
NAME	RODRIGUEZ, AMALOA C	☐ Delete	NAME STREET ADDRESS	Rodei	ove Amoles	D. Talka ba	_ Cal Cuarde	7,000,000	ਹ
STREET ADDRESS CITY-ST-ZIP-	169 E. FLACLER STREET SUITE- MANN FL 33131	10 <i>21</i>	CITY-ST-ZIP	Deer	rely Besch	ie No.126 FL 33444			
TITLE		☐ Delete	TITLE				☐ Change	Addition	•
NAME STREET ADDRESS			NAME STREET ADDRESS		•				
CITY-ST-ZIP	-	Delete	CITY-ST-ZIP				☐ Change	Addition	-
NAME		F 1. LIDERCIE	NAME	Ì			onange	- Parament	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE NAME				Change	☐ Addition	
NAME STREET ADDRESS			STREET ADDRESS) ;		# 15 # <u>*</u>			
CITY-ST-ZIP	of the same of the	e e e e e e e e e e e e e e e e e e e	CITY-ST-ZIP		140.07/02/0			damasis -	
indicated	certify that the information supplied with to on this report or supplemental report is	rus ming does not quality for the true and accurate and that my	signature shall h	ave the sa	me legal effect as if ma	i atatules. I luriner d ide under oath; lhat	erury mat the in I am an officer	or director	