SIGNATURE

2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 21, 2002 8:00 am Secretary of State

1. Entity Nam Significant		Γ# PD nents, Inc.	000	000	1481	7/	V			0	5-21-2	2002 90	875 0	006 ***15
Principal Place of Business Mailing Address 8045 Noremac Avenue same														
Miami, FL 33141								ļ						
2. Principal Pl	lace of Bu	siness		3. Mailing	Address									
same				same										
Suite, Apt.	#, etc.		.	Suite, A	pt. #, etc.	-			•	DO NOT WE	RITE IN	THIS SPA	CE	
City & State				City & S	tate				FEI Numbe					ied For
Zip	Zip Country			Zip			Country		65-1009466 5. Certificate of Status Desired \$8			\$8.75	Not Applicable 8.75 Additional	
	Names	and Address of C				l						Fee Req		
John Incorv		and Address of C	urrent R	egistered.	Agent			7. N	ame and A	ddress of Nev	v Regis	tered Age	nt	
655 NW 128	, ,						Name				- 1			
Miami, FL 3						;	Street Addr	ess (P.O.	Box Numbe	r is Not Accep	otable)			<u> </u>
						ŀ	<u>. </u>							
					-	G	City					FL Zi	p Code	
8. The above r	named ent	tity submits this st	tatement	for the pure	nose of chang	ring its ro	nictored of	fina or roa	internal area					
		my dadinio dino di	tatomon.	ioi ine puij	pose of char	ing its re	gistered ti	lice of reg	istered age	nt, or both, in t	ne State	or Florida).	
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	Signature, t	typed or printed nam	e of registe	ered agent a	nd title if applic	able. ((NOTE: Regi	stered Agen	it signature re	quired when rein	nstating)		Date	
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9. This corpora	ation is eli ing require	gible to satisfy its	Intan-	Aft	FILE NOW er MAY 1, 20	III FEE IS	\$150.00 /ill_be \$550	00.00	10. Election		inancin	.,	\$5.0	
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I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my inged, or on an attachment with an address, with all other like empowered.

Glennis Arias, Pres.

4/19/2002