2001 UNIFORM BUSINESS REPORT (UBR)				R)
DOCUMENT # P00000056511 1. Entity Name				ĦΙŒĎ
Wire opec Corporation				01 NOV 28 PM 1:40
Principal Place of Business Mailing Address				SECRETARY OF STATE TALLAHASSEE, FLORIDA
	The second secon			
1785		<u> </u>	a Ave	2001 AMENDED 1100
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		ZUOI AMENDED UBR
City & Stat	M.FL	City & State Wiami, FL		4. FEI Number Applied For Not Applicable
Zip M	24 USA	2jp 33126	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Name Name Baweneche, Michael				
Jaffee, Amold M 1785 NW 79 Ave				ddress (P.O. Box Nymber is Not Acceptable)
Miami, FL 37126				
101114/011, 12 777.26			City	Miamy FL Zyzizt
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				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) See Criteria on back Make Check Payable to Department of State				
11.	OFFICERS AND (12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Maddition
NAME STREET ADDRESS	Jaffee, Arnold M 1715 NW 79 Ave	₩ Delete	TITLE NAME STREET ADDRESS	Gray, Erik 1785 NW 79 Ave
CITY-ST-ZIP	MIAMI, AL moi26	☐ Delete	CITY-ST-ZIP	SP Change MAddition
NAME STREET ADDRESS CITY-ST-ZIP		20.7	NAME STREET ADDRESS "CITY-ST-ZIP	Wetmore, William W 1785 NW 79 Ave Miami, 1723126
TITLE		☐ Delete	TITLE	TD
NAME STREET ADDRESS			NAME STREET ADDRESS	Barreneche Wichael 1750 NW 74 Ave
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		CITY-ST-ZUP	Miami, FL 33126
TITLE NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS	Bogar Danny 1735 NW 70 Ave
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP	Miami, 12 77124
NAME STREET ADDRESS		2	NAME STREET ADDRESS	1000047306914
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP TITLE	******81, 25 ******81, 25
NAME STREET ADDRESS		y-,	NAME STREET ADDRESS CITY-ST-ZIP	
13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if				
changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: CETIC LAVAY)				