FILED

2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

Apr 26, 2001 8:00 am Secretary of State DOCUMENT # P0000061047 1. Entity Name GUTCAST DEVELOPMENT CORP. 4-26-2001 90254 032 ***158.75 Principal Place of Business Mailing Address 13200 S.W. 128TH ST., BLDG, G 13200 S.W. 128TH ST., BLDG, G MIAMI FL 33186 MIAMI FL 33186 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Numoe Not Applicable Zio Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KADE, PAUL M Street Address (P.O. Box Number is Not Acceptable) 9300 S. DADELAND BLVD., SUITE 408 **MIAMI FL 33156** Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NO*E: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution Added to Fees Ø (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE CR2E034 (10/00 ☐ Delete ☐ Change Acdition [NAME **GUTIERREZ, JOSE** NAME STREET ADDRESS 13200 S.W. 128TH ST., BLDG. G STREET ADDRESS CITY ST-ZIP **MIAMI FL 33186** TITLE ☐ Delete Change T.T.E Addition NAME **GUTIERREZ, TANIA** NAME STREET ADDRESS 13200 S.W. 128TH ST., BLDG. G STREET ADDRESS CITY-ST-ZIP C!TY-ST-7I9 MIAMI FL 33186 Delete 700.8 T.T. F ☐ Change [Addition NAME CASTRO, RAPHAEL NAME STREET ADDRESS 2701 S.W. 89TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33165 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME CASTRO, VICTORIA NAME STREET ADDRESS 2701 S.W. 89TH AVENUE STREET ADDRESS CITY - S1 - ZIP CITY-ST-ZIP **MIAMI FL 33165** De:ete TITLE TIFLE ☐ Addition Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 7171.6 Change ☐ Delete Addition 1919 F NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Statutos. 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 path; 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