SOUN PLAGLER STREET 1900 W PLAGLER STR	. Entity Name		0070893	ìL		ay 28, 20 Secretary 05-28-2002 91698		
Principal Place of Business 3. Mailing Address Do NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Do NOT WRITE IN THIS SPACE City & State Chy & State 4. FEI Number 65-1026891 Applied For Number 75. Additional Fee Required Zip Country Zip Country 8. Certificate of Steus Desired \$57.4000000 . Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Accoptable) ROHAN, LAURENCE U Street Address (P.O. Box Number is Not Accoptable) Street Address (P.O. Box Number is Not Accoptable) City FL Zip Code 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 Dot Encorpration is eligible to satisfy its Intrapible This corporation is eligible to satisfy its Intrapible This corporation is eligible to satisfy its Intrapible Dot Encorprating S55.00 May E Market Above State Above State Above State	Principal Place of Business 1900 W FLAGLER STREET MIAMI FL 33135		1900 W FLAGLER STREET			-		
SUID: Appl. P. Bit: Country City & State 4. FEI Number Applied For City & State City & State 4. FEI Number 65-1026891 Not Applied Zip Country Zip Country S. Contricate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent ROHAN_EAURENCE J Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 2511 PONCE DE LEON BLVD STE 320 City FL Zip Code CRAL GABLES FL 33134-6082 City FL Zip Code . The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Interformation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Tax ting requirement and elects to de so. After May 1, 2002 Fee will be \$550.00 Interformation of State Interformation \$4dded to Fees 10. Election Campaign Financing (See orteria on back) OFFICERS AND DIPECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIPECTORS IN 11 11. OFFICERS AND DIPECTORS Interformation of State Interformation of State Interformation of Change <	Principal Pl	lace of Business						11 00 1 111 1 08 1
City & State Clip & State Clip & State Clip & State Not Applica Zip Country Zip Country S. Certificate of Status Desired \$\$2.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROHAN; LAURENCE J Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 2511 PONCE DE LEON BLVD STE 320 CORAL GABLES FL 33134-6082 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. OATE IGNATURE Spreature, topod or primed registered agent and the 4 applicate (HOIE: Registered Agent agrinuse registered agent, or both, in the State of Florida. IGNATURE Spreature, topod or primed lagent and the 4 applicate (HOIE: Registered Agent agrinuse registered agent, or both, in the State of Florida. IGNATURE Spreature, topod or primed lagent and the 4 applicate (HOIE: Registered Agent agrinuse registered agent, or both, in the State of Florida. IGNATURE Spreature, topod or primed lagent and the 4 applicate (HOIE: Registered Agent agrinuse registered agent, or both, in the State of Florida. IGNATURE Image Agent agrinuse registered agent, or both, in the State of Florida	Suite, Apt.	#, etc.	Suite, Apt. #, etc.					<u></u>
2.0 Country Example 9. Centricate of status based Example Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ROHAN; EAURENCE U Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) 2511 PONCE DE LEON BLVD STE 320 CORAL GABLES FL 33134-6082 City FL Zip Code City FL Zip Code 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. DME IGNATURE	City & State		City & State		4. FEI Number	65-1026891		Applicable
B. Name and Address Of Current Registered registered registered agent and their registered agent agent signature registered agent registered agent and their registered agent and their registered agent agent signature registered agent is a fact and agent signature registered agent registered agent and their registered agent and their registered agent agent signature registered agent and their registered agent and their registered agent agent signature registered agent registered agent and their registered agent and their registered agent agent signature registered agent registered agent agent agent agent agent agent. DATE IGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$551.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May 6 Added to Fees 1. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 1. OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	Zip	Country	Zip	Country			Fee Required	
2511 PONCE DE LEON BLVD STE 320 CORAL GABLES FL 33134-6082 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. Date GNATURE Signature, typed of printed name of registered agent agent and the if applicable. (NOTE. Reguered Agent signature registered agent, or both, in the State of Florida. GNATURE Signature, typed of printed name of registered agent agent and the if applicable. (NOTE. Reguered Agent signature registered agent agent and the if applicable. DATE In is corporation is eligible to satisfy its intangible FILE NOW!!! FEE IS \$150.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May E Added to Fees 14. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. Clintran, JUAN C Hard May E Added to Fees STREET ADDRESS CITY-ST-2IP Change Add 17. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change Add 18. OUINTAN, JUAN C HARET ADDRESS STREET ADDRESS CITY-ST-2IP Change Add 17. OUINTANA, ROXANA HARET ADDRESS Delete THE NAME Change Add 17		6. Name and Address of Current	Registered Agent	Name	7. Name and Ad	dress of New Registered	d 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. Identified agent and the if applicable. (NOTE: Regulared Agent signature required when reinstating) DATE IGNATURE	2511 PONCE DE LEON BLVD STE 320							
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. IGNATURE Strature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature registered agent, or both, in the State of Florida. IGNATURE Strature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature registered agent, or both, in the State of Florida. In the corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Int: OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Int: D QUINTANA, JUAN C Int: Int: D QUINTANA, BAS STREET Int: Int: D QUINTANA, ROXANA 14371 SW 38 STREET Int: Int: Int: D QUINTANA, ROXANA 14371 SW 38 STREET Int: Int: Int: Int: Int: Int: D QUINTANA, ROXANA 14371 SW 38 STREET Int: Int: <td>City</td> <td><i>v</i></td> <td>F</td> <td>L Zip Code</td> <td></td>				City	<i>v</i>	F	L Zip Code	
TLE D Delete TITLE Change Add AME QUINTANA, JUAN C NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Change Add MIAMI FL 33175 Delete TITLE D Change Add MAME DUINTANA, ROXANA Delete TITLE Change Add AME DUINTANA, ROXANA STREET ADDRESS STREET ADDRESS Add TREET ADDRESS 14371 SW 38 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE Delete TITLE STREET ADDRESS STREET ADDRESS Add ITY-ST-ZIP MIAMI FL 33175 CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP Add ITY-ST-ZIP Delete TITLE Delete TITLE Change Add AME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP Change Add AME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Change Add AME S	Tax filing (See crite	requirement and elects to do so. ria on back)	After May 1, 20 Make Check Paya	002 Fee will be \$550.00 ble to Department of S) Trust F	Fund Contribution.	Added	to Fees
TLE D Change Add AME CUINTANA, ROXANA TREET ADDRESS ITY - ST - ZIP TLE ADDRESS ITY - ST - ZIP TLE AME STREET ADDRESS ITY - ST - ZIP TLE AME STREET ADDRESS ITY - ST - ZIP TLE AME STREET ADDRESS ITY - ST - ZIP Change Add NAME STREET ADDRESS ITY - ST - ZIP	TLE Ame Tree¶ address	D QUINTANA, JUAN C 14371 SW 38 STREET		NAME STREET ADDRESS			Change	Addition
ITLE Delete TITLE Change Add AME TREET ADDRESS ITTY-ST-ZIP CTTY-ST-ZIP	AME ⁻ TREET ADDRESS	D Quintana, Roxana 14371 SW 38 Street	Delete	NAME STREET ADDRESS			Change	Addition
	tle Ame Treet address			NAME STREET ADDRESS			Change	Addition
TLE Delete TITLE Change Add AME NAME TREET ADDRESS ITY-ST-ZIP CITY-ST-ZIP	tle Ame Treet address		Delete	NAME STREET ADDRESS		<u> </u>	Change	Addition
111-51-2Ir	ITLE IAME ITREET ADORESS		Delete	TITLE NAME STREET ADDRESS			Change	Addition
	ITLE		Delete	NAME STREET ADORESS				Addition