NAME STREET ADDRESS CITY-ST-2P     NAME STREET ADDRESS CITY-ST-2P     ITTLE       STREET ADDRESS CITY-ST-2IP     ITTLE       STREET ADDRESS CITY-ST-2IP     ITTLE       ITTLE     IDelete       TITLE     IDelete       NAME     STREET ADDRESS       CITY-ST-2IP     ITTLE       ITTLE     IDelete       TITLE     IDelete       STREET ADDRESS     ITTLE       CITY-ST-2IP     ITTLE       IDelete     TITLE       IDelete     TITLE       NAME     IDelete       STREET ADDRESS     ITTLE       ITTLE     IDelete       NAME     ITTLE       ITTLE	DOCUME 1. Entity Name RATZAN & AL	ENT #		<b>1653 REPC</b> 1051801		(UBN)					90084 (		:00 a State 150.00
2. Principal Place of Business 3. Mailing Address Sufa, Apt. #, alc. City & State	200 SOUTH BISCAY		990	200 SOUTH BISCAYNE B	lvd suite	2990				- 4	41	3 Z	
2. Principal Place di Beginess 3. Maline Address  Sute, Act. e, ec.  Do NOT WRITE IN THIS SPACE  City & Sate  Coverty	Miami Fl 33131			MAMI PL 33131									
City & State       City & State       A. FEI Number       Applied For         Zip       Country       I. Cellificate of Status Desired       S. Artificate Of Status Desired       S. Artif	2. Principal Place of	of Business		3. Mailing Address		_			13 <b>0 0</b> 0 0 1 1 0 1 1	1211) 99141 C.S	116 <b>00</b> 101 0110	PT 124 B1 PU 141	
Construct         Country         Country         Country         Country         So efficience of Status Desired         So efficience of Status Desired         So efficience           COPRORATE CREATIONS NETWORK INC. 901 FOURTS INTERET # 2000         The Registered Agent         The Registered Agent         The Registered Agent         The Registered Agent           COPRORATE CREATIONS NETWORK INC. 901 FOURTS INTERET # 2000         Street Address (P.O. Box Number is Not Acceptable)         The Registered Agent         The Acceptable)           Interest Address (P.O. Box Number is Not Acceptable)         City         FL         Zip Code           8. The above named entity submits this statement for the purpose of ofwarging its registered Agent spatial read agent, or both, in the State of Florida.         Street Address (P.O. Box Number is Not Acceptable)           Street Address (P.O. Box Number is Not Acceptable)         Diff         Diff         The Acceptable)           Interest on back         Ports Ingresset Agent spatial read agent, or both, in the State of Florida.         The Acceptable is agent, or both, in the State of Florida.         Street Address (P.O. Box Number is Not Acceptable)           Interest on back         OFFICERS AND DIRECTORS         12         About Const Spatial read Agent spatia r	Suite, Apt. #, etc	c <i>.</i>		Suite, Apt. #, etc.					DO NO	T WRITE I	N THIS SP	ACE	
Z60         Country         Zp         Country         S. Certificate of Status Desired         \$8.75 Additional results           country         seconds. Name and Address of Current Registered Agent	City & State			City & State			4. F	El Number	- 110	64	09.		
CORPORATE CREATIONS NETWORK INC.     Streat Address (P.O. Box Number is Not Acceptable)     If QUIRTH STREET #200 MIAM BEACH FL 33133     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     City     FL     Zip Code     Streat Address (P.O. Box Number is Not Acceptable)     Determine of State     The Address (P.O. Box Number is Not Acceptable)     Determine of State     Construction     Address (P.O. Box Number is Not Acceptable)     Determine of State     Construction     Address (P.O. Box Number is Not Acceptable)     Determine of State     Construction     Address (P.O. Box Number is Not Acceptable)     State     Construction     Address     Construction     Address     Construction     Construction     Address     Construction     Construction     Construction     Address     Construction     Const	Zip	Country		Zip	Count	v	5. 0		· · · -		\$	8.75 Ad	
94 F FOURTH STREET #200 MIAM BEACH FL 33133       Sheel Address (P.O. box Number is NO Acceptable)         0:r       FL       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.       FL       Zip Code         S(ONATURE 	<u> </u>	Name and Addre	ess of Current Re	gistered Agent	·		7. N	ame and A	ddress of	New Regi	atered Ag	jent	
City         FL         Zip Code           6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fords.         SIGMATURE           By Contract Terms of registered agent and the registered agent, or both, in the State of Fords.         Date           SIGMATURE         Explants type of poles tarms of registered agent and the registered.         Date           Tax filling registerent and elicits to do so. (See criteria on back)         After Mary 1, 2002 Feed Will be \$55.000         The Election Campaight Financing         S5.000 May See Added to Feed           11.         OFFICERS AND DIRECTORS         12.         ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11           Title         Date         Iffill         Make Check Payable to Department of State         Competition (Change Change)         Addition           NWE         Street Addess         Iffill         Competition (Change Change)         Addition         Street Addess	941 FOURTH S	STREET #200	Work Inc.			Street Address (	P.O. B	ox Number	is Not Acco	ptable)			
SIGNATURE       Express types or prime of regrammed spons and the # explication       (NOTE Registered Agent spectral spectral register)       Dite <ul> <li>This corporation is eligible to casisfy its Intengible Tax filing requirement and elects to do so. (See Orther on tbock)</li> <li>OPFICERS AND DIFECTORS</li> <li>The Corporation is eligible to casisfy its Intengible (See Orther on tbock)</li> <li>OPFICERS AND DIFECTORS</li> <li>Cherry State To Department of State</li> <li>OPFICERS AND DIFECTORS</li> <li>Cherry State To Department of State</li> <li>Delete</li> <li>The Mark State Address</li> <li>Cherry State To Department of State</li> <li>Cherry State To Department of State To Department of State To Department of State</li> <li>Cherry State</li> <li< td=""><td>MIANN DEACH I</td><td>FL 33139</td><td></td><td></td><td>-</td><td>City</td><td></td><td></td><td></td><td></td><td>FL</td><td>Zip Coo</td><td>ie</td></li<></ul>	MIANN DEACH I	FL 33139			-	City					FL	Zip Coo	ie
(Soo criteria on back)       Make Check Payable to Department of State       Intel FUND Contribution.       Added to Fees         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         ITTLE       Defete       ITTLE       Chenge       Addition         STRET ADDRESS       200 SOUTH BISCATYNE BLVD SUITE 2990       STRET ADDRESS       Change       Addition         STRET ADDRESS       200 SOUTH BISCATYNE BLVD SUITE 2990       STRET ADDRESS       Change       Addition         STRET ADDRESS       Convisition       ITTLE       Ittle       Ittle       Ittle       Ittle         NAME       Delete       ITTLE       Ittle </th <th></th> <th></th> <th>e of registered event and t</th> <th></th>			e of registered event and t										
TITLE       D       Delete       TITLE       NAME       Change       Addition         STREET ADDRESS       200 SOUTH BISCAYNE BLVD SLITTE 2990       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P         TITLE       MAMM FL 33131       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P         TITLE       NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P		n is eligible to satis	ify.its.Intangible	FILE-NOW	-FEE-	S-\$150:00		10. Elect		-	ing		
TITLE       Delete       TITLE       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P         TITLE       Oelete       TITLE       Change       Addition         STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       Change       Addition         STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P         TITLE       Oelete       TITLE       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P         TITLE       Oelete       TITLE       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P         TITLE       Oelete       TITLE       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P         TITLE       Intel Oelete       TITLE       NAME       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P       City ST-2P         CITY-ST-2P       Delete       TITLE       NAME       Change       Addition         NAME       STREET ADDRESS       CITY-ST-2P       Change       Additi	<b>9.</b> This corporation Tax filing require (See criteria on	n is eligible to catis ement and elects to back)	ify.its.Intangible to do so.	After May 1, 20 Make Check Payat	111-FEE   102 Fee w bie to De	S-\$150:00 vill be \$550.00	te	10. Electi Trust	Fund Cont	ribution.		Adde	d to Fees
TITLE       ITTLE       ItTLE <td< td=""><td>9. This corporation Tax filing require (See criteria on 11. TITLE NAME STREET ADDRESS 200</td><td>n is eligible to catis ement and elects to back) O ZAN, STUART N SOUTH BISCAY</td><td>ify its Intangible</td><td>After May 1, 20 Make Check Payat ECTORS</td><td>11-FEE-1 02 Fee w bie to Dep 12. TITLE NAME STREET</td><td>S-\$150.00 vill be \$550.00 partment of Sta</td><td>te</td><td>10. Electi Trust</td><td>Fund Cont</td><td>ribution.</td><td>ING</td><td>Adde</td><td>d to Fees IS IN 11</td></td<>	9. This corporation Tax filing require (See criteria on 11. TITLE NAME STREET ADDRESS 200	n is eligible to catis ement and elects to back) O ZAN, STUART N SOUTH BISCAY	ify its Intangible	After May 1, 20 Make Check Payat ECTORS	11-FEE-1 02 Fee w bie to Dep 12. TITLE NAME STREET	S-\$150.00 vill be \$550.00 partment of Sta	te	10. Electi Trust	Fund Cont	ribution.	ING	Adde	d to Fees IS IN 11
STREET ADDRESS       STREET ADDRESS         CITY-ST-ZIP       Delete         TITLE       Delete         NAME       STREET ADDRESS         CITY-ST-ZIP       Change         Addition         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         NAME         STREET ADDRESS         CITY-ST-ZIP         TITLE         ITTLE         ITTLE <t< td=""><td>- 9. This corporation Tax filing require (See criteria on 11. TITLE D NAME RAT. STREET ADDRESS CITY-ST-ZIP MIAN TITLE NAME</td><td>n is eligible to catis ement and elects to back) O ZAN, STUART N SOUTH BISCAY</td><td>ify its Intangible</td><td>After May 1, 20 Make Check Payat ECTORS</td><td>111-FEE-I 102 Fee w bie to Deg 12. TITLE NAME STREET CITY-S TITLE NAME</td><td>S-\$150.00 will be \$550.00 partment of Sta I ADDRESS ST-ZP</td><td>te</td><td>10. Electi Trust</td><td>Fund Cont</td><td>ribution.</td><td>Ing</td><td>Adden</td><td>d to Fees IS IN 11</td></t<>	- 9. This corporation Tax filing require (See criteria on 11. TITLE D NAME RAT. STREET ADDRESS CITY-ST-ZIP MIAN TITLE NAME	n is eligible to catis ement and elects to back) O ZAN, STUART N SOUTH BISCAY	ify its Intangible	After May 1, 20 Make Check Payat ECTORS	111-FEE-I 102 Fee w bie to Deg 12. TITLE NAME STREET CITY-S TITLE NAME	S-\$150.00 will be \$550.00 partment of Sta I ADDRESS ST-ZP	te	10. Electi Trust	Fund Cont	ribution.	Ing	Adden	d to Fees IS IN 11
NAME STREET ADDRESS CITY-ST-ZIP TITLE CITY-ST-ZIP CITY	-9. This corporation Tax filing require (See criteria on 11. TITLE D RATE STREET ADDRESS CITY-ST-ZIP MIAN TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE ·	n is eligible to catle ement and elects to back) O ZAN, STUART N SOUTH BISCAY MI FL 33131	ify its Intangible	ECTORS	HI-FEE-I 12 Fee w ble to Dep 12. TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE	S-\$150.00 vill be \$550.00 partment of Sta I ADDRESS ST-ZIP I ADDRESS	te	19. Elect Trust DITIONS/CI	Fund Cont	ribution.	Ing	Ádded IRECTOR Change	d to Fees
Image: Street ADDRESS       Image: Delete       Title       Image: Delete       Change       Addition         NAME       Street ADDRESS       CitY-st-ZIP       CitY-st-ZIP       CitY-st-ZIP       CitY-st-ZIP         Title       Image: Delete       Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Image: Delete       Addition         Street ADDRESS       CitY-st-ZIP       Image: Delete       Title       Image: Delete       Image: Delete       Title       Image: Delete	S. This.corporation     Tax filing require     (See criteria on     11.     TITLE     D     RAT,     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     STREET ADDRESS     STREET ADDRESS	n is eligible to catle ement and elects to back) O ZAN, STUART N SOUTH BISCAY MI FL 33131	ify its Intangible	ECTORS	HI-FEE-I 12 Fee w ble to Deg 12. TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S STREET STREET	S-\$150.00 vill be \$550.00 partment of Sta I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	te	19. Elect Trust DITIONS/CI	Fund Cont	ribution.	Ing	Ádded IRECTOR Change	d to Fees
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 Ihis 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	S. This.corporation     Tax filing require     (Soo criteria on     11.     TITLE     D     RAT,     STREET ADDRESS     CITY-ST-ZIP     TITLE     NAME     STREET ADDRESS     STREET ADDRES     STREET     STREET ADDRES	n is eligible to catis ement and elects to back) ZAN, STUART N SOUTH BISCAY MI FL 33131	Internet of the second se	ECTORS	HI-FEE-I 12. Fee w ble to Deg 12. TITLE NAME STREET CITY-5 TITLE NAME STREET CITY-5 TITLE NAME STREET CITY-5 TITLE NAME STREET	S-\$150.00 All be \$550.00 partment of Sta I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP I ADDRESS ST-ZIP	te	19. Elect Trust DITIONS/CI	Fund Cont	ribution.	ing TS AND D [ [	Added	d to Fees IS IN 11 Addition Addition Addition.
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 Statules; and that my name appears in Block 11 or Block 12 if	-9. This.corporation Tax filing require (See criteria on 11. TITLE D RATE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE L NAME STREET ADDRESS	n is eligible to catis ement and elects to back) ZAN, STUART N SOUTH BISCAY MI FL 33131	Internet of the second se	ECTORS	HI-FEE-I 12. Fee w ble to Deg 12. TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE STREE CITY-S TITLE NAME STREE	S-\$150-00 All be \$550.00 partment of Sta I ADDRESS ST-ZIP I ADDRESS ST-ZIP ADDRESS I-ZIP ADDRESS I-ZIP	te	19. Elect Trust DITIONS/CI	Fund Cont	ribution.	ing [] RS AND D [ [	Added IRECTOR Change Change Change	d to Fees IS IN 11 Addition Addition Addition
	-9. This.corporation Tax filing require (See criteria on 11. TITLE D RATE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS	n is eligible to catis ement and elects to back) ZAN, STUART N SOUTH BISCAY MI FL 33131	Internet of the second se	ECTORS	HI-FEE-I 12. Fee w ble to Deg 12. TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE CITY-S TITLE NAME STREE STREE CITY-S TITLE NAME STREE	S-\$150-00 All be \$550.00 partment of Sta I ADDRESS ST-ZIP I ADDRESS ST-ZIP ADDRESS I - ZIP ADDRESS I - ZIP ADDRESS I - ZIP	te	19. Elect Trust DITIONS/CI	Fund Cont	ribution.	ing [] RS AND D [ [ [ [	Added IRECTOR Change Change Change	d to Fees IS IN 11 Addition Addition Addition Addition