03-14-2002 90056 006 ***150.00

P01000056424

1. Entity Name

MD 2 INVESTMENTS INC.

Principal Place of Business

DOCUMENT #

415 GRAND BAY DRIVE #203 KEY BISCAYNE FL 33149

2. Principal Place of Business

Mailing Address

3. Mailing Address

415 GRAND BAY DRIVE #203

KEY BISCAYNE FL 33149

14359 MIRAMAR PRKW 14359 MIRAMAR PRKW Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For MIRAMAR MIRAMAR 65-1111036 Not Applicable Country \$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 CALVO, LIZABETH F Street Address (P.O. Box Number is Not Acceptable) 328 CRANDON BLVD SUITE 226 **KEY BISCAYNE FL 33149** City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE DIRECTOR TUSIANI, DANIEL OSCAR ☐ Delete TITLE NAME TUSIANI, DANIEL OSCAR NAME 14359 MIRAMAR PRKWY. STREET ADDRESS 415 GRAND BAY DRIVE #203 STREET ADDRESS CITY-ST-7IP **KEY BISCAYNE FL 33149** CITY-ST-ZIP MIRAMAR, FL. 33027 ☐ Delete DIRECTOR TITLE Change ☐ Addition NAME PIMAS VERGE, DANIEL MIGUEL PIMAS VERGE. DANIEL MIGUEL NAME STREET ADDRESS 14359 MIRAMAR PRKWY 415 GRAND BAY DRIVE #203 STREET ADDRESS CITY-ST-ZIP MIRAMAR, FL. 33027 **KEY BISCAYNE FL 33149** CITY-ST-ZIP Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition | NAME NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-7IP

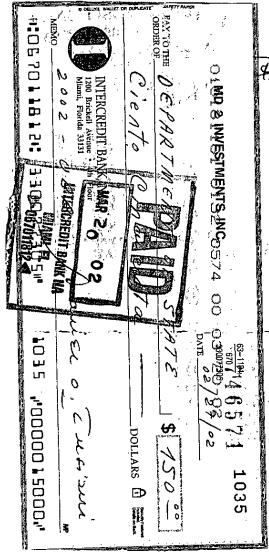
SIGNATURE:

CITY-ST-ZIP

carries:

200	2 UNIFORM BUSI	NESS REPO	RT (UB	R)	VII.	allan	rent	,	
DOCU 1. Entity Na	JMENT # P0100	00056424		:	7//5-		, = ,		
415 GRAND	ace of Business DRAY DRIVE #203 YNE FL 33149	Mailing Address 415 GRAND BAY DRIVE #203 KEY BISCAYNE FL 33149			97320				
	Place of Business ! (ves Dairy Rd. #, etc. 228	3. Mailing Address 1031 Ives Dairy Rd. Suite, APT: #, etc. 228		d.	DO NOT WRITE IN THIS SPACE				
Zip	ATH MIAMI BEACH P	City & State NORTH MIAI Zip 33179	MI BEACH Country USA	P,FC.	FEI Number Certificate of State	us Desired		8.75 Ad	
CALVO, 328 CR/	6. Name and Address of Current F LIZABETH F ANDON BLVD SUITE 226 CAYNE FL 33149		Name	ddress (F	7. Name and Addre	ss of New R	egistered Ag	ee Requiri	ed
8. The above	e named entity submits this statement for Signature, typed or printed name of registered agent an		City egistered office of			e State of Flo	FL rida.	Zip Coc	1e
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	After May 1, 2002 Make Check Payable	to Departmen	50.00. Lof State	e	d Contribution	n. 🗆	Added	00 May Be d to Fees
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changed (ertify that the information supplied with the on this report or supplemental report is truoration or the receiver or trustee empower or on an attachment with an address, with	and to execute this report as	required by Chap	ינטי דייטיי	-iorida Statutes; and th	at my name a	appears in Blo	ock 11 or	Block 12 if
SIGNATI	URE: SIGNATURE AND TYPED OR PRIN	TED NAME OF SIGNING OFFICER OR I	DIRECTOR	, , , ,	Date Date	12/27/	Daylime	43 ~	1246

AHachment



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Polouso 5 6424

MD 2 Investments Inc.

Formed in Florida

Federal Employer Identification Number (Federal Tax ID Number): 65-1111036

> Lizabeth F. Calvo Esquire Lizabeth F. Calvo, P.A. 328 Crandon Boulevard Suite 226 Key Biscayne FL 33149 305-365-0902

Affachment

JULY 10-2002

97220

DIVISION OF CORPORATIONS UBR

#P0100056424

P.O. BOX 1500

TALLA HASSEE, FL. 32302-1500

ATT: 65-1111 036

TO WHOM IT MAY CONSERN;

WE SEND 4 CHECK

Nº 1035 - ON FEB. 27-2002 - (CASHED ON MARCH

20-2002).

WE HAVE NOT RECEIVED ANY CHECK BACK

WE ARE ADDING THE FEI Nº TO THE

DOCUMENT, AND THE CHANGE OF ADDRESS

IN: PRINCIPAL PLACE OF BUSINESS AND

ADDRESS OF DIRECTORS.

SINCERELY,

DANIEL O. TUSIANI

ENCL: COPY OF CHECK, COPY OF LAST PRESENTATION, COPY OF IDENTIFICATION Nº AND DOC. PO10000 56424