SIGNATUR

SIGNATURE:

DOCUMENT # P01000117678 CMR OF MIAMI, INC. Principal Place of Business Main-q Address 3460 SW 1320G AVENUE MIAMI F, 33175 Main-q Address 3460 SW 1320G AVENUE MIAMI F, 33175 Main-q Address 1470 NW 107 Avenue 1470 NW 107 Avenue 1470 NW 107 Avenue Suite D
CMR OF MIAMI, INC. Principal Place of Business
Principal Place of Business 3490 SW 132ND AVENUE MAMI FL 33175 2. Principal Place of Business 1470 NW 107 Avenue 3. Mailing Address 4. FEI Number 5. Conflictate of Status Desired 7. Name and Address of New Registered Agent 4. FEI Number 5. Conflictate of Status Desired 7. Name and Address of New Registered Agent 4. FEI Number 4. Name 4. FEI Number 5. Conflictate of Status Desired 7. Name and Address of New Registered Agent 4. FEI Number 5. Street Address of New Registered Agent 5. Street Address of New Registered Agent 6. Name and Address of New Registered Agent 6. N
349 SW 132ND AVENUE MAMI FL 33175 3. Maling Address 1470 NW 107 Avenue 1584 State 1584 Sta
3.48 SW 132ND AVENUE MAMI FL 33175 3.40 Maling Address 14.70 NW 10.7 Avenue 15. Suite D 16. Suite D 17. Name and Address of New Registered Agent 18. Name and Address of New Registered Agent 19. Name and Address of New Registered Agen
2. Principal Place of Business
2. Principal Place of Business 1470 NW 107 Avenue Suite D Suite D City & State Miami, Florida City & State Miami, Florida Country 33172 Country 33172 Country 33172 Country 33172 Country Coun
Suite D Suite
Suite D Suite Suite D Suite Suite D Suite Suite D Suite Suite Suite Suite D Suite Su
Suite D City & State Miami , Florida
Miami , Florida Miami , Florida O3-0446178 Not Applicable Zip
Signature Sign
HERRERA, MARIO 3490 SW 132ND AVENUE MIAMI FL 33175 Street Address (P.O. Box Number is Not Acceptable) 1470 NW 107 Avenue City Miami FL Zip Code 33172 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 lamillar with, and accept the obligations of registered agent and the if applicable. SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Aft
HERRERA, MARIO 3490 SW 132ND AVENUE MIAMI FL 33175 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 pagistered agent. SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria or back) 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITIE PD HERRERA, MARIO MAKE PD HERRERA, MARIO STREET ADDRESS STREET ADDRESS TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS TITLE Delete TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 MIAMI FL 33172 TITLE Delete TITLE Delete TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 70 NW 107 Avenue, Suite D Miami, Florida 33172 TITLE MAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 MIAMI FL 33172 TITLE Delete Delete TITLE Delete Delete TITLE Delete TITLE Delete Delete TITLE Delete Delete TITLE Delete Delete TITLE Delete Delete Delete Delete Delete Delete Delete
Street Address (P.O. Box Number is Not Acceptable) 1470 NW 107 Avenue Suite D City Miami FL 33175 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 and title if applicable. SIGNATURE Signature, hypod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) P. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) The polyment and elects to do so. (Make Check Payable to Department of State) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD
Addition Street Address Suite D
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 Fiorida. I am familiar with, and accept the obligations of registered agent and rate if applicable. 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 10. Election Campaign Financing Trust Fund Contribution. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. STREET ADDRESS 3490 SW 132ND AVENUE MIAMI FL 33175 1470 NW 107 Avenue Suite D CITY-SI-ZIP MIAMI, Florida 33172 17. Change Addition STREET ADDRESS 1470 NW 107 Avenue, Suite D CITY-SI-ZIP Miami, florida 33172 17. Change Addition NAME Raisa Diaz STREET ADDRESS 1470 NW 107 Avenue, Suite D Miami, florida 33172
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) P. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) The submit of state FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD Delete TITLE NAME HERRERA, MARIO STREET ADDRESS 3490 SW 132ND AVENUE MIAMI FL 33175 Delete TITLE NAME NAME Raisa Diaz STREET ADDRESS TREST ADDRES
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD
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 Tax filling requirement and elects to do so. (See criteria on back) 10. Election Campaign Financing Trust Fund Contribution. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD HERRERA, MARIO 3490 SW 132ND AVENUE MIAMI FL 33175 TITLE Delete TITLE Delete TITLE Secretary NAME NAME STREET ADDRESS S
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 Tax filling requirement and elects to do so. (See criteria on back) 10. Election Campaign Financing Trust Fund Contribution. 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PD HERRERA, MARIO 3490 SW 132ND AVENUE MIAMI FL 33175 TITLE Delete TITLE Delete TITLE Secretary NAME NAME STREET ADDRESS S
After September 13, 2002 Fee will be \$750.00 (See criteria on back) After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME HERRERA, MARIO STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 TITLE Delete TITLE Secretary CITY-ST-ZIP NAME Raisa Diaz STREET ADDRESS STREET ADDRES
Atter September 13, 2002 Fee will be \$750.00 (See criteria on back) Added to Fees
TITLE PD Delete TITLE NAME HERRERA, MARIO STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 TITLE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 TITLE STREET ADDRESS CITY-ST-ZIP MIAMI FL 33175 TITLE SECRET ADDRESS TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP Miami, Florida 33172 TITLE STREET ADDRESS TREET ADDRESS TREET ADDRESS AMAGINION NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS TREET ADDRESS T
NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME Addition STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME Addition STREET ADDRESS CITY-ST-ZIP NAME ADDRESS CIT
TITLE Delete TITLE Secretary Change MAddition STREET ADDRESS CITY-ST-ZIP Delete TITLE Secretary Change MAddition STREET ADDRESS CITY-ST-ZIP Miami, florida 33172 TITLE Delete TITLE Change Addition Secretary Change MAddition Secretary Secretary Secretary Secretary Change MADDITION Secretary
TITLE Delete TITLE Secretary Change MAddition STREET ADDRESS CITY-ST-ZIP Delete TITLE Secretary Change MAddition STREET ADDRESS CITY-ST-ZIP Miami, florida 33172 TITLE Delete TITLE Change Addition Secretary Change MAddition Secretary Secretary Secretary Secretary Change MADDITION Secretary
NAME STREET ADDRESS CITY-ST-ZIP ROBERS CITY-ST-ZIP ROBERS CITY-ST-ZIP ROBERS CITY-ST-ZIP ROBERS CITY-ST-ZIP ROBERS CITY-ST-ZIP ROBERS Raisa Diaz 1470 NW 107 Avenue, Suite D Miami, florida 33172 TITLE Change Addition
STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP Miami, florida 33172 TITLE Delete TITLE
TITLE Delete TITLE Change Addition
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
TITLE Delete TITLE Change Addition
NAME 500008704896
STREET ADDRESS 10/30/0201108012 ***750.00 CITY-ST-ZIP CITY-ST-ZIP
TITLE Delete TITLE Change Addition
NAME NAME
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP
TITLE Delete TITLE Change Addition
NAME STREET ADDRESS 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 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 12 if

FEGUITAR Circo Herrera 10-10-02 305-7:18-8900

BE OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Description

Descripti