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JARAMILLO, RAUL 14350 SW 133 AVE MIAMI, FL 33186 Name Street Address (P.O. Box Number is Not Acceptable) Chy FL 20, Code 6. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lam familiar with, and accept metodigations of registered agent. Sitest Address (P.O. Box Number is Not Acceptable) Chy FL Zap Code Chy FL Zap Code 0.016 Chy FL Chy FL Chy FL Chy FL Chy FL After May 1, 2008 Fee will be \$550.00 Name Street Address TO OFFICERS AND DIRECTORS IN 11 Name Addition Street Address 14550 SM 133 AVE Chr Sar 2P MAMI, FL 33186 Chr Sar 2P Chr Sar 2P Maddition Ma	Zlp			Country				LL F	ee Require		
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NAME STREET ADDRESS CITY-ST-ZP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 receivar or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: MAME STREET ADDRESS CITY-ST-ZP Description of the corporation of the receivar or trustee empowered. SIGNATURE: MAME STREET ADDRESS CITY-ST-ZP C	TITLE NAME STREET ADORESS CITY-ST-ZIP		Deletz	NAME STREET ADDRESS				[Change	Addition	
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	SIGNAT		DR PRINTED NAME OF SIGNING OFFI	CER OR DIRECTOR		3-	24-06 Date	Day	ime Phone #		