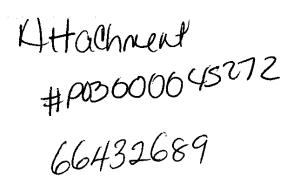
FILED Aug 27, 2004 8:00 am Secretary of State 04-26-2004 90997 035 ***150.00

DOCUMENT # P03000045272 1. Entity Name IN & S INSPECTION CONSULTANS, INC.				
Principal Place of Business 1101 BRICKELL AV STE 800 NORTH MIAMI, FL 33131		Mailing Address 1101 BRICKELL AV STE 800 NORTH MIAMI, FL 33131		66432689
Principal Place of Business 3.		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04222004 Chg-P CR2E034 (10/03)
City & State	9	City & State		4. FEI Number Applied For Not Applied For Not Applied For
Zip	Countils	Ζίφ	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
<u> </u>	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent
SUAREZ NELSON			Street Aricha	ss (P.O. Box Number is Not Acceptable)
1101 BRICKELL AV STE 800 NORTH MIAMI, FL 33131				or visit various is not recognized.
100	e e		City	FL Zip Code
8. The above	named entity submits this statement fi ions of registered agent.	or the purpose of changing it	ts registered office or regi	stered agent, or both, in the State of Florids. I am familiar with, and accept
SIGNATURE	Signature, typical or printed marge of registered again	i and tille if applicable. (NO	TTE: Regulated Agant signature req	ured when renetating) DATE
FILI After Ma	E NOW!!! FEE IS \$150.00 ny 1, 2004 Pee will be \$550.	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Foes
10.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	11.	. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE .	PD SUAREZ, NELSON	☐ Delete	DILE	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	1101 BRICKELL AV STE 800 NO MIAMI, FL 33131	ORTH	STREET ADDRESS CITY-ST-ZIP	
TRE		☐ Delete	TOTLE NATURE	☐ Change ☐ Addition
STREET ADDRESS DITY-ST-ZEP			STREET ADDRESS CITY-ST-ZIP	
-DILE-		Delen	nne	Crange Addition
HAME STREET ADDRESS CITY-ST-ZIP			- NAME STREET ADDRESS GITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change ☐ Addition
TITLE HAME STREET ADDRESS		☐ Delete	TITLE HAME STREET ADDRESS	☐ Change ☐ Addition
CITY-ST-ZIP			CITY-ST-ZIP	
TITLE NAME STREET ADDRESS		☐ Delete	TIFILE NAME STREET ADDRESS	Change Addition
CITY-ST-ZIP			CTY-ST-ZP	Control of
1	11 71-101	ith this filling does not qualify is true and accurate and that powered to execute this report, with all other like empowers	for the exemption stated in it my signature shall have ort as required by Chapter and.	n Section 119.07(3)(f), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE: UTICOLOG				



August 23, 2004

Florida Department of State Division of Corporations PO Box 1500 -Fallahassee, FL 32302-1500

To Whom It May Concern:

This letter is regarding the 2004 for profit corporation annual report of IN & S Inspection Consultans, Inc. The annual report with the check of \$150 was mailed before the due date. Unfortunately, I was out of town and did not receive your notice requesting information until now.

Please remove any penalties for the annual report and let me know if you need further information.

Enclosed you will find:

- Letter received from the Florida Department of State regarding the 2004 annual report of IN & S Inspection Consultans, Inc
- 2004 for profit corporation annual report of IN & S Inspection Consultans, Inc with corrections.

Sincerely,

Nelson Suarez