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After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Added to Fees 10. OFFICERS AND DIRECTORS Inte P VALDEPENAS, PABLO SINDGEHAVEN DRIVE U000000890766 OFFICERS AND DIRECTORS VALDEPENAS, PABLO SINDGEHAVEN DR CONSTALES, MARINA SINDGEHAVEN DR CONSTALES, MARINA SINDGEHAVEN DR CONSTALES, MARINA SINDGEHAVEN DR CONSTALES, MARINA SINDE CONST, FL 32137 DO NOT WRITE INTEL NALM COAST, FL 32137 INC UD0000890766 OH/22/08-80108-017 8.75 UD0000890766 OH/22/08-80108-017 8.75 INC UD0000890766 OH/22/08-80108-017 8.75 INDE MORES INDEX 100 C	the obligati	ions of registered agent. Signature lyped or printed name of registered	agent and trils if applicable (NOTF: Register	iad Agont signature required	d when reinstating)	in the State of F		familiar with, and		
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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 receiver 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	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME									
	12. I hereby c indicated of the corr	on this report or supplemental rep poration or the receiver or trustee	iort is true and accurate and that my sign empowered to execute this report as requ	aturo chall bave the	e taotto lenol offert a	e il mode linder	oalb that I s	am an ollicer or di	rector	

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