DOCUMENT # P06000067506         04-30-2007 90861 048 ***150.00           Findplanm         Kills Anvestment, corp.         6. Water and Address         6. UU 4 D 92.7           Principal Place of Busines:         B930 Min 147 In ERACE         B930 Min 147 In ERACE         B930 Min 147 In ERACE           MARAN, FL 33018         B930 Min 147 In ERACE         B930 Min 147 In ERACE         B930 Min 147 In ERACE           State Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.           State Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.           State Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.           State Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.         Dodr. Adv. etc.           VanL2, PEDRO M         Soos Adv. Th State of Hex Registered Agent         Name         Marine         State Address of New Registered Agent           VanL2, PEDRO M         Soos Adv. Th State of Hex Registered Agent         Name         Marine         State Address of New Registered Agent           VanL2, PEDRO M         Soos Adv. adv. etc.         Dodr. Dodr. etc.         State Address of New Registered Agent           VanL2, PEDRO M         Soos Adv. Done         Percended address of New Registered Agent         The Registered Agent           VanL2 / VanL2 / VanL2 /	2007	FOR PROI	FIT CORPORA	FILED Apr 30, 2007 8:00 an Secretary of State				
8930 NW 147TH TERRACE     8930 NW 147TH TERRACE       MAM, FL 33018     MAM, FL 33018       2. Principal Place of Business - No P.O. Bex #     3. Maing Address       Suite, Apl. #, etc.     0207200 ° Chg-P     CR2E034 (1206)       City & State     City & State     0207200 ° Chg-P     CR2E034 (1206)       Zip     Country     2. Centinue of Status Desired     1. Proceedings of New Registered Agent     1. Proceedings of New Registered Agent       Zip     Country     State Address of Current Registered Agent     7. Name and Address of New Registered Agent     1. Proceedings of New Registered Agent       YANEZ, PEDRO M     State Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ, PEDRO M     Street Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ, PEDRO M     Street Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ, PEDRO M     Street Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ, PEDRO M     Street Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ, PEDRO M     Street Address (P.O. Box Number of New Registered Agent     1. Proceedings (P.O. Box Number of New Registered Agent       YANEZ (PEDRO M     Street Addr	<ol> <li>Entity Name</li> </ol>	Г # Р060000						
Suite, Apt. #, etc.     02072007     Chy.P.     CR2E034 (12/06)       Chy & State     Chy & State     Applied F.       Zip     Country     Zip     Country     State       Zip     Country     Zip     Country     State       Applied F.     State     Image: State     Image: State       YANEZ, PEDRO M     Solar Address of Current Registered Agent     T. Name and Address of New Registered Agent       YANEZ, PEDRO M     Solar Address of New Registered Agent     T. Name and Address of New Registered Agent       YANEZ, PEDRO M     Solar Address (P.O. Box Number is Not Acceptable)     FL       Zop     Cav     FL     Zop Code       MIAMU FL 33126     Cav     Cav     FL       Street Address (P.O. Box Number is Not Acceptable)     FL     Zop Code       After May 1, 2007 Fore will be \$550.00     PEROS     Street Address (P.O. Box Number is Not Acceptable)       After May 1, 2007 Fore will be \$550.00     PEROS     Stote Of Move Ba       After May 1, 2007 Fore will be \$550.00     PEROS     Name       Stote Address (P.O. Box Number is Not Acceptable)     PEROS       After May 1, 2007 Fore will be \$550.00     PEROS     Stote Address       Stote Address     Cave     PEROS       Stote Address     Cave     Stote Address       Stote Address	8930 NW 147TH TERRACE 8930 NW 147TH TE			RACE				
City & State     City & State     4 Ell Number     AppliedT       Zip     Country     Zip     Zip     Zip     State       Zip     Country     Zip     Zip     State     State       Zip     Country     Zip     Country     State     State       Zip     Country     Zip     Country     State     State       Zip     Country     Zip     Country     State     State       XANEZ, PEDRO M     Soas     State     Name     State       Sobs NW TTH STREET     AppliedT     Name     Name       APT #706     MIAMI, FL 33126     City     FL     Zip Code       N     The above named entry submits this statement for the purpose of changing its registered algent, or both. In the State of Poldia. Lam familier web, and active as a family submits and applied algent and and applied family family submits and applied algent and applied family fam	2. Principal Place of Bus	siness - No P.O. Box #	3. Mailing Address					
Zip     Country     Zip     Country     Size Country     Siz	Suite, Apt. #, etc.		Suite, Apt. #, etc.		 02072007 Chg-P CR2E034 (12/06)			
Zip         Country         Zip         Country         S. Certificate of Satus Desired         Sat.75 Additional           4. Name and Address of Current Registered Agent         7. Name and Address of New Registered Agent         7. Name and Address of New Registered Agent           YANEZ, PEDRO M         Sireel Address of New Registered Agent         7. Name and Address of New Registered Agent           YANEZ, PEDRO M         Sireel Address of New Registered Agent         9. Enclose Agents (P.O. Box Number is Not Acceptable)           PAT #706         MIANI, PL. 33126         Sireel Address (P.O. Box Number is Not Acceptable)           *         City         FLE         Zip Code           8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Lan familier with, and ac the diffusion of registered agent.         MMT           *         City         FLE NOWILL FEE IS \$150.000         Precision Companying Financing         MMT           *         OFFICERS AND DIPECTORS         11.         ADDIFIONS/CHANGES TO OFFICERS AND DIPECTORS IN 11         ADDIFIONS/CHANGES TO OFFICERS AND DIPECTORS IN 11           *         Control         Site Address         Change         A           *         OFFICERS AND DIPECTORS         11.         ADDIFIONS/CHANGES TO OFFICERS AND DIPECTORS IN 11           *         Control         Nate         <	City & State		City & State		4. FEI Number 2.0 - 1807724 Applied			
VANEZ, PEDRO M 5085 NW 7TH STREET APT #706 MIAMI, FL S3126     Name       In the document of the purpose of changing its registered agent, or both, in the State of Poride. Tam familier with, and so the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City     FL     Zip Code       In the document of registered agent.     City City     FL     Zip Code       In the document of registered agent.     City City City City City City City City	Zip	Country	Zip	Country	5 Certificate of Status Desired \$8.75 Addition			
5085 NW 7TH STREET APT #706       Street Address (P.O. Box Number is Not Acceptable)         APT #706       City       FL       Zip Code         MIAMI, FL 33126       City       FL       Zip Code         A       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 so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the State of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the state of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the state of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the state of Florida. I am familiar with, and so the compatibility of registered agent, or both, in the state of Florida. I	6. Nan	ne and Address of Curi	ent Registered Agent	Name	7. Name and Address of New Registered Agent			
City         Ell         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 ac the diffusions of registered agent.         Image: Control of registered agent.         Image	5085 NW 7TH STREET			Street Addres	Street Address (P.O. Box Number is Not Acceptable)			
the deligations of registered agent.   SiGNATURE   Signature bonds ormed name of registered agent and ble 4 acticitative   (NOTE Registered Agent agentine instancing)   DATE    Status bonds ormed name of registered agent and ble 4 acticitative   (NOTE Registered Agent agentine instancing)   After May 1, 2007 Fee will be \$550.00   10.   OFFICERS AND DIRECTORS   11.   Abded to Fees   10.   OFFICERS AND DIRECTORS   11.   Added to Fees   20.0   OFFICERS AND DIRECTORS   11.   Abded to Fees   20.0   OFFICERS AND DIRECTORS   11.   Abded to Fees   20.0   OFFICERS AND DIRECTORS   11.1   Abded to Fees   20.0   OFFICERS AND DIRECTORS   11.1   Abded to Fees   20.0   0.0   11.1   Abded to Fees   20.0   11.1    11.1  <				City	City FL Zip Code			
10.       OFFICERS AND DIRECTORS       11.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         ITTLE       Pression       Change       A         WAVE       Davio Vanez       STREET ADDRESS       CITY-ST-2P         ITTLE       STREET ADDRESS       CITY-ST-2P       Change       A         ITTLE       STREET ADDRESS       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P       CITY-ST-2P         ITTLE       STREET ADDRESS       STREET ADDRESS       CITY-ST-2P		eed or printed name of registered.	9. Election Camp	baign Financing	\$5.00 May Be			
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NAME STREET ADDRESS CITY-ST-ZIP 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 dictated on this report or supplemental report is tue and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or dire of the corporation or the received or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block changed, or on an attachment with an address, withful off like empowered.	NAME STREET ADDRESS		Delete	NAME STREET ADDRESS	🗋 Change 🗖	Addition		
Ward Gauge Davie 4 - 4KOF	NAME STREET ADDRESS			NAME STREET ADDRESS	Change	] Addition		
$\Theta(CNATUDE) = \langle V V V V V V V V V V V V V V V V V V$	12. I hereby certify that indicated on this re of the corporation of changed, or on an a	the information supplied port or supplemental rep r the receiver or trustee attachment with an addr	d with this filling does not qualify ort is the and accurate and the empowered to execute this repo ess, with all other like empower	for the exemptions contain the my signature shall have to the strange of the state of the strange of the strange of the strange of the strange of the strange of the strange of the strange of the strange of the strange of the strange of the strange of the strang	ained in Chapter 119, Florida Statutes. I further certify that the inform the same legal effect as if made under oath; that I am an officer or d in 607, Florida Statutes; and that my name appears in Block 10 or Blo	nation firector ick 11 if		
SIGNATURE	SIGNATURE:	SIGNATURE AND TYPE	D OR PRINTED NAME OF SIGNING OFFIC	ER OR DIRECTOR	-IC UNU Date Daytime Phone #			