ROFIT CORPORATION NSTATEMENT FILED 00100892 07 NOV -6 PM 4:52 SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address 9631 FOUNTAINEBLEAU BLVD 315 MIAMI, FL 33172 No-City & State nimm Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required ame and Address of Current Registered Agent 7. Name and Address of New Registered Agent NO, ANDRES Y SR Street Address (P.O. Box Number is Not Acceptable) SUNTAINEBLEAU BLVD ศ์โAMI. FL 33172 FL 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature: typed or printed harms of registered agent and title if applicable (NOTE: Registered Agent signature required when remistating) DATE FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2008, Fee will be \$300.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TO OFFICERS AND DIRECTORS 10. 11 500112029 Share Calcium 11/06/07--01014--002 **150.00 TITLE TITLE ☐ Delete VICTORIANO, ANDRES Y SR NAME NAME 9631 FOUNTAINEBLEAU BLVD #315 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 CITY-ST-ZIP Delete ☐ Change 🔲 Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CDY-S1-719 CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Dalete TITLE TITLE NAME HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delote TITLE ☐ Change atthabi TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 011Y-01-2IP 12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. 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 creet as it made under early 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. That changed, or on an affection with per address, with all other like empowered.