2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P17866 1. Entity Name AVATAR FINANCE, INC.

FILED May 18, 2000 8:00 am Secretary of State

				03-18-2000 90		5.73	
Principal Plac	e of Business	Mailing Address					
01 ALHAMBRA CIRCLE 2TH FL ORAL GABLES FL 33134		201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES FL 33134-5108					
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN	I THIS SPACE		
City & State		City & State		4. FEI Number 65-0030552		oplied For ot Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Add		
	6. Name and Address of Current R	egistered Agent	· 	7. Name and Address of New Regis	stered Agent		
			Name				
201 12Ti	KERRIGAN, JUANITA I 201 ALHAMBRA CIRCLE 12TH FL		Street Addre	Street Address (P.O. Box Number is Not Acceptable)			
COF	RAL GABLES FL 33134		City		FL Zip Cod	e	
. The above	named entity submits this statement for	the purpose of changing it	s registered office or regi	stered agent, or both, in the State of Florida	l.		
NOMATURE							
SIGNATURE .	Signature, typed or printed name of registered agent an	d title if applicable. (NO	OTE: Registered Agent signature req	uured when reinstating)	DATE		
Tax filing requirement and elects to do so. After MAY 1, 20		V!!! FEE IS \$150.00 2000 Fee will be \$550.0 able to Department of	i ilust runa Continuation.		0 May Be		
1.	OFFICERS AND D	<u>. l </u>	12.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	S IN 11	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	VD GETMAN, DENNIS J. 201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES FL 33134	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	☐ Addition	
ITLE .	VSD	☐ Delete	TITLE		☐ Change	☐ Addition	
IAME TREET ADORESS	KERRIGAN, JUANITA 201 ALHAMBRA CIRCLE 12TH FL		NAME STREET ADDRESS				
HTY-ST-ZIP	CORAL GABLES FL 33134		CITY-ST-ZIP				
ITLE AME TREET ADDRESS	CORAL GABLES FL 33134 PD MCNAIRY, CHARLES 201 ALHAMBRA CIRCLE 12TH FL	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Change	☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	PD MCNAIRY, CHARLES 201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES FL 33134 V	☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ Change		
ITLE ITREET ADDRESS ITY-ST-ZIP ITLE ITREET ADDRESS	PD MCNAIRY, CHARLES 201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES FL 33134 V CHURCHILL, ROBERT 201 ALHAMBRA CIRCLE 12TH FL	□ Delete ☑ Delete	CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
ITLE ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS	PD MCNAIRY, CHARLES 201 ALHAMBRA CIRCLE 12TH FL CORAL GABLES FL 33134 V CHURCHILL, ROBERT	□ Delete ☑ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·	Addition Addition	

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.