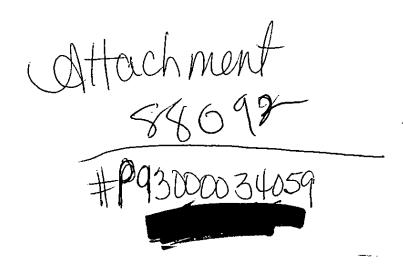
FILED May 29. 2002 8:00 am

Daytime Phone #

_1Entity Na	JMÉNT # P930 ame z enterprise , corp.	00034059			Secreta 05-07-2002	ary of : 90358 029 *	
Principal Place of Business Mailing Address 9975 SW 56TH ST 9975 SW 56TH MIAMI FL 33165 MIAMI FL 33165			\$ T		88092		
2. Principal 997	2. Principal Place of Business 99755 W 565T 3. Mailing Address						
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.					650911653		
MI	AM!	City & State			4. FEI Number APPLIED FOR Applied For		
Zip 33	/ <i>F</i> /	Zip	Country	5.	Certificate of Status Desired	\$8.75 A	Not Applicable Additional
<u> </u>	- 6. Name and Address of Curren	t Registered Agent	Name_	7.	Name and Address of New Regi		
	HECTOR L 7 Seth St . 33165	-		reet Address (P.O. Box Number is Not Acceptable)			
	e named entity submits this statement for		City			FL Zip Co	ode
SIGNATURE	Signature, typed or printed name of registered agent oration is eligible to satisfy its Intangible requirement and elects to do so	FILE NOW!	: Registered Agent signature	<u> </u>	10. Election Campaign Financi	DATE	
(See criter	ria on back)	Make Check Payab		of State	Trust Fund Contribution.	Adda	00 May Be ed to Fees
NTLE NAME TREET ADDRESS NTY-ST-ZIP	DP CHAVEZ, HECTOR L 9975 SW 56TH ST MIAMI FL 33165	Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	AD	DITIONS/CHANGES TO OFFICER	IS AND DIRECTO	Addition
TY-ST-ZIP	DST CHAVEZ, LEA M 9975 SW 58TH ST MIAMI FL 33165	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		☐ Change	Addition (
LE ME NEET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	<u> </u>		☐ Change	Addition
TY-ST-ZIP TLE ME REET ADORESS TY-ST-ZIP		☐ Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS	-		☐ Change	☐ Addition
LE ME MEET ADORESS Y-ST-ZIP		☐ Dolete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
.E ME EET ADORESS (-ST-ZIP		☐ Delste	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
or the corpo		rorad to avecute this sense as	e exemption stated i	n Section 11 the same leg 607, Florida	19.07(3)(i), Florida Statutes, I furthe gal effect as if made under cath; th a Statutes; and that my name appe	r certify that the intent of t	formation or director Block 12 if



PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

NOTE: Pursuant to chapter 440.10(1),(g),2, F.S., a sole protrietor, partner, or officer of a corporation who elects exemption from the Florida Workers' Compensation Law may not recover benefits or compensation under Chapter 440.

Michael Mc Collan

AUTHORIZED SIGNATURE

CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.