PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APF	PLICATION FOR	FLORIE	DA DEPARTMEI Sandra B. Mor	tham	EINSTA	TEME	T		
REIN	STATEMENT)	Secretary of S	State State	EHOLA			V CSPS	
•			JIVISION OF CONFOR	沙海			S 96		
1. Corporal	JMENT # P930	0006	9869	e Pi	· 為[ALC.		n.	
SAMY	WORLDWIDE, INC.	HASSEC TO THE PARTY OF THE PART							
Principal Pl	ace of Business	Mailin	g Address				75 Z		
	3 Southwest 72nd i, Florida 33156	Avenue				MW8	SANTA 26		
	ddresses are incorrect in any way, line ncipal Office Address, If Applicable		information and enter ling Address, If Applic		4. Date Incorporat	DO NOT WRITE II	THIS SPACE		
Suite, Apt. (#, etc.	Suite, Apt. 6	, etc.		4. Date incorporated or Qualified To Do Business in Florida October 7, 1993				
City & State	9	City & State	City & State			5. FEI Number Applied For Applied For Applied For Applicable Appli			
Zip	Country	Zip	Zip Country .			6. CERTIFICATE OF STATUS DESIRED			
7. Names a	and Street Addresses of Each Officer a	nd/or Director (F)	orida nonprofit corpora	itions must list at le	est 3 directors)	in the second		146241258	
Trite(s) 1 Name of Officers and/or Directors 2			I Of	eet Address of Each ficer and/or Director se Post Office Box I	· I		City / State / Zip		
P/Tr	GEORGINA SOTO		11233 So	uthwest	72nd Ave.	Miami.	, Florida	33156	
E/11	GEORGINA SUIO		22233 50		12112 11141		No.		
/P/S	CARLOS B. SOTO		11233 Sc	uthwest	72nd Ave.	<u>Miani</u>	, Florida	33156	
					· .				
					10	00020	003161 9601136-	12 -004	
						****59	2.50 ****	332.50	
	8. Name and Address of Curre	nt Registered Ag	jent		9. Name and Add	rees of New Regi	letered Agent	A COMPANY DAY	
				Name BERNARD	B. WEKSL	er, eso.		8	
				Street Address (P.O. Box Number is No. Jeune Ro	ot Acceptable)		96	
		Suite, Apt. #, Etc.	L K	en de la companya de		8			
				City. Coral G			State Zip Code FL 3313	4 4 4	
10. I, being	appointed the registered agent of the	above named con	poration, am familiar w			307.0505, F.S.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Signature o Registered		8. Wes	sle .			Date Novy	mber 5	(1191	
1			GENT MUST SIGN			1 (1 3,2) 10 3 (201)	2000 18		
1th Do De	pes this corporation pay opt. of Revenue under S	/ any intan S. 199.032	gible tax to th , Florida Stat	ne utes. Yes	□ No X	(See	other side for inform on intangible tax.)	ation	
12. I do he lease to certify this reinfees ovunder of SIGNAT	lean in	nd with this filing in bility of non-compositive or trustee dissolution has be. The information	s voluntarily furnished pliance with Section 11 empowered to asceuti en eliminated, the co- indicated on this app GEORGINA				19.07(3)(k), Florids is med exempl from puts. I further certify the 01 or 617.0401, F.8 the same legal effe		
	EIGNATURE AND TYPED OR	PRINTED NAME OF	BIGNING OFFICER OF	DIRECTOR	Secure Statements	Dete	Daytime Phone	Organizacji (Silja	

THE CONTRACTOR OF THE