FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION

SIGNATURE:



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham

1996		Market 197	etary of State F CORPORATIONS			
DOCUM	1ENT # P94	000022962 ((2)			
1. Corporation N WORLE	Name D Market Inc. Impol	· ·				
Principal Place of Business POST OFFICE BOX 442618 MIAMI FL 33144		Mailing Address POST OFFICE BOX 442618 MIAMI FL 33144				
				3. Date Incorporated or Qualified 03/24/1994	3a. Date of Las 05/0	st Report 1/1995
2. Principal Place	e of Business	2a. Mailing Address 26		4. FEI Number 65-0485442	<u></u>	Applied For
Suite, Apt. #, (etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	<u></u>	Not Applicable 75 Additional
City & State		City & State		6. Election Campaign Financing	F	ee Required .00 May Be
Zip	Country	7ip	Country	Trust Fund Contribution 8. This corporation has liability for in	L A	dded to Fees
24	9. Name and Address of Cu	rrent Registered Agent	[30]	Florida Statutes	□ No	1 \$ 199.032,
_		nem neglatered Agent	81 Name	10. Name and Address of New Ro	egistered Agent	
BARRETO, ESPERANZA V 8480 S. W. 34TH TERRACE			82 Street Add	dress (P.O. Box Number is Not Acceptable	e)	
MIAMI FL			83			
			84 Orty			
11. Pursuant to the	he provisions of Sections 607.0	502 and 607 1508. Floods Statut	_ ; l . L	oration submits this statement for the purp	FL 85	Zip Code
or registered familiar with, a	agent, or both, in the State of F and accept the obligations of S	iorida Such change was authoriz section 607,0505. Horida Statutes	ed by the corporation's box	pration submits this statement for the purp and of directors. Thereby accept the appo	ose of changing in intment as registe	ts registered office red agent. I am
SIGNATURE	nature, typed or ported has all of reguleral a	and the same	und en			
12.	OFFICERS	AND DIRECTORS	TE Postered Agent agreeous requir	nd where stating: ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIREC	TORS IN 12
TITLE NAME	D Barreto, esperanza	V DELETE	† † TITLE		Chang	
STREET ADORESS	8840 SOUTH WEST 34T		1.2 NAME 1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33155		1.4 City-St-Zip			
TITLE	1848A Cen. 3	4 + and DELETE	2 1 DIGE		☐ Chang	ge 🔲 Addition
NAME Street address	18480 SW-3 miam FC 33	e de la company	2.2 NAME			
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,		2.3 STREET ADDRESS			
TITLE		☐ DÉLETE	2.4.0 (TY - ST - ZIP 3.1.1 (TLF		Chang	ge Addition
NAME			: 3.2 NAME		L.J Onling	- Moditori
STREET ADDRESS CITY-ST-ZIP			33 STREET ADDRESS			
TIFLE		☐ DELETE	3.4 CITY - ST - ZIP 4.1 TITLE			
NAME		[] vess	4.2 NAME		☐ Chang	ncitibbA [9]
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST ZIP			4.4 CHTY - ST - ZIF			
AMÉ		☐ DELETE	5 1 IriLE		☐ Chang	e 🔲 Addition
STREET ADOPESS			5.2 NAME 5.3 STHEET ADDRESS			
CITY - \$1 - ZIP			5 4 CHY - ST - ZIP			
TLE		☐ DELETE	6 THEF		☐ Change	e Addition
IAME ITREET ADDRESS			6.2 NAME		·	
HTY - ST - ZIP			6.3 STREET ADDRESS			
4. I do hereby cer	rtify that the information supplie	d with this filing is voluntarily furnis	64 City - St - ZiP shed and does not qualify fi	or the exemption stated in Section 119.07	7/2016) Elegide Oct	tutos 16
 oath; that I am 	i an officer or director of the cor	moration or the recoil or or to esta-	the post to the property	or the exemption stated in Section 119.07 ite and that my signature shall have the sa s report as required by Chapter 607, Flori	าเอเเก, คอกตล Stat ภาษ legal effect as da Statutos คลาไล	otes, i further s if made under
		or on an attachment with an addre	SS		an orazatea, ario i	тки тпу насте
SIGNATUR	RE: _ #3a	RR/XX		6-7-96	1200 0	ا سروم پر
	SIGNATURE AND TYPED	OF PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Oate	Daylor Pron	