PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

2. Principal Office Address 3. Mailing Office Address 100_West_Pine Loch_Ave	4	FILED 01 MAR -2 PM 1:05	EPARTMENT OF STATE therine Harris cretary of State in of corporations		la la	RPORATI	
2. Principal Office Address 100 West_Pineloch_Ave		SECRETARY OF STATE TABLIAHASSEE, PLORIDA	7	,		oration Name	1. Corpor
Suite, Apt. #, etc. 4. Date incorporated or Qualified To Do Business in Florida 08/31/94 City & State Orlando, FL Orlando, FL John L. Soileau Street Address (P.O. Box Number is Not Acceptable) 1970 Michigan Avenue Suite, Apt. #, etc. Suite, Apt. #, etc. 108/31/94 4. Date incorporated or Qualified To Do Business in Florida 08/31/94 Applied for 6. CERTIFICATE OF STATUS DESIRED Size Address (P.O. Box Number is Not Acceptable) 1970 Michigan Avenue Suite, Apt. #, etc. Bldg, C City Cocoa State Zinc Code FL 32922 B. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 F.S. Signature of Registered Agent REGISTERED AGENT MOST SIGN IL Soileau 9. Names and Street Addresses of Each Officer and/or Directors Officers and/or Directors City / State / Zip Don Primi C/O 100 West Pineloch Ave Orlando, FL 32856-850				orp.	nciai C	ali finar	. Λέ
State, Apt. #, etc. A. Date Incorporated or Qualified To Do Business in Florida O8/31/94			Address	3. Mailing C	ess	cipal Office Addre	2. Princip
City & State Corlando, FL Orlando, FL Sounty Applied for Satz Addition CERTIFICATE OF STATUS DESIRED Satz Addition To a Certificate Address of Current Registered Agent Name John L. Soileau Street Address (F.O. Box Number is Not Acceptable) 1970 Michigan Avenue ****1500.00 ****150 State Zio Code FL 132922 B. I. being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN John L. Soileau 3.11/01 REGISTERED AGENT MUST SIGN John L. Soileau P. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officer and/or Directors Officer and/or Director Director Officer and/or Director Officer and/or Director Officer and/or Director Officer and/or Director Orlando, FL 32856–850	0	NSTATEMENCIA	568508				
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P Don Primi c/o 100 West Pineloch Ave Orlando, FL 32856-850		· · · · · · · · · · · · · · · · · · ·	nonprofit corporations must list at least 3 directors)	ach Officer and/or Director (Flo	ddresses of E	es and Street Ad	9. Name:
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)8	Orlando, FL 32856-8508	/o 100 West Pineloch Ave	<u> </u>	on Primi	Do	P
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10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that w		shooter 607 or 617 C C Market and the state of the	and to produce this continue and the second	No the reserve	office		

Daytime Phone #

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR