DOCUMENT # P94000067988 1. Comparison Name TRIVE CORPORATION Dot to state of business Protopial Place of business Protopial Place of Bu	FILE NOW: FILING FEE AFTER MAY 1ST IS \$55 PROFIT CORPORATION ANNUAL REPORT 1999			MENT OF STATE Harris of State	Apr 23, 19 Secretar	LED 999 8:00 y of Stat 55 025 ***150.00	
Principal Place of Business Malling Address (CIS) WI 125 STRET P.O. BXX 3285 HALEAH GARDENS FL 32016 MAMI FL 33154.5865 2. Principal Place of Business 2a. Malling Address 2. Principal Place of Business 2a. Malling Address 3. Do NOT WRITE IN THIS SPACE 3. Do NOT WRITE IN THIS SPACE 3. State 4. FEI Number 2. Principal Place of Business 2a. Malling Address 2. On Address of State 5. Conficte of State During 35.00 Marg State 2. On Address of Country 2b. The cooperation or state During In Statement for the place of Place Address of Country 8. Conficte of States During Address of New Registered Agent 3. Mark 12b. Conficte of States During In Statement for the purple of the registered Agent 3a. Name and Address of New Registered Agent 3. Name and Address of Country 8. Conficte of States During In Statement for the purple of the registered Agent 3. Place Address of Country 8. Conficte of States During In Statement for the purple of the registered Agent	DOCUN 1. Corporation	MENT # P940000	67988				
2. Principal Place of Business 2a. Maining Address 4. FEI Numer Applied Fet 21 25 50 65 50 <th>10275 NW 129 \$</th> <th>STREET</th> <th>P.O. BOX 526865</th> <th></th> <th>DO NOT WRITE 3. Date Incorporated or Qualifed</th> <th></th> <th></th>	10275 NW 129 \$	STREET	P.O. BOX 526865		DO NOT WRITE 3. Date Incorporated or Qualifed		
23 26 This Contribution Added to Fees 21p Country 21p Country 8. This coporation owes the current year Intangible Personal Property Tax. Added to Fees 9. Name and Address of Current Registered Agent 8. This coporation owes the current year Intangible Personal Property Tax. Added to Fees 10. Name and Address of Current Registered Agent 81 Name TRILLES, JORGE 82 Street Address (P.O. Box Number is Not Acceptable) 33 34 34 44 City FL 85 Zip Code 11. Pursuant to the protocol Sectoms 607 0562 and 607 1560. Florids Statutes, the above-hanned Approximation's board of directors. 100 100 33 33 34 34 34 34 Street Address (P.O. Box Number is Not Acceptable) 34 34 35 City FL 85 Zip Code 11. Pursuant to the protocol Sectoms 607 0562 and 607 1560. Florids Statutes. 35 Address (P.O. Box Number is Not Acceptable) 36 City FL 85 Zip Code 12. OFFICERS AND DIRECTORS	21 Suite, Apt. # 22	, etc.	26 Suite, Apt. #, etc.		4. FEI Number 65-0520424 5. Certificate of Status Desired 6. Election Comparent Einancion	Not \$8.75 Ac Fee Req \$5.00 N	Applicable dditional juired
TRILLES, JORGE 10275 N.W. 129TH ST. MIAMI FL 33016 82 Streed Address (P.O. Box Number is Not Acceptable) 83 84 City 85 86 11. Pursuant to the provisions of Sections 607.0602 and 607.1509, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Lam familiar with, and accept the oblightons of Sections 607.0602 and 607.1509, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the oblightons of Sections 607.0602. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the oblightons of Section 607.0506, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the oblightons of Section 607.0506, Florida Statutes, the appointment as registered agent. Lam familiar with, and accept the oblightons of Section 607.0506, Florida Statutes, the appointment as registered agent. Lam familiar with, and accept the oblightons of Section 607.0506, Florida Statutes, the appointment as registered agent. Lam familiar with, and accept the oblightons of Section 607.0506, Florida Statutes, the appointment as registered agent. Lam familiar with, and the oblightons of Section Section 507.0507, Florida Statutes, the appointment as registered agent. Lam familiar with, and the provide approximation of the oblighton of Section 507.0507, Florida Statutes, the appoint familiar with and the approximation of the appoint oblighton of Section 507.0507, Florida Statutes, thereby accept and the appoint familiar with and the app	23	Country	28 Zip 29 3	o]	Trust Fund Contribution 8. This corporation owes the curren Personal Property Tax.	Added to t year Intangible	Fees
Biguinus, typed or printed agent and tits if anglicable. (NOTE: Regulature deputies deputies required when identify). (DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ITLE P DELETE 1.1 T/T.E Change Addition NAME TRILLES, JORGE 1.2 NAME 1.3 STREET ADDRESS Change Addition STREET ADDRESS 10275 N.W. 129TH ST. 1.3 STREET ADDRESS Intellector Change Addition GPV-ST-ZP MIAMI FL 33016 1.4 CHY-ST-ZP Change Addition NAME VECIN, JUAN 22 NMRE 23 STREET ADDRESS Change Addition STREET ADDRESS 14651 S.W. 110TH TERRACE 23 STREET ADDRESS Change Addition ITTLE DELETE 3.1 TTLE Change Addition NAME 32 STREET ADDRESS 33 STREET ADDRESS Change Addition STREET ADDRESS 33 STREET ADDRESS 33 STREET ADDRESS Change Addition NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS C	1027 MIAM 11. Pursuant t office or re agent. I an	5 N.W. 129TH ST. II FL 33016 o the provisions of Sections 607.0502 ar	lorida. Such change was au	83 84 City	vertion submits this statement for the nu	FL 85 Zip Co inpose of changing its r the appointment as reg	registered
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STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information 15. CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP			6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP	J~~		

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 GNATUR	AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

5105NT. 4/20/99 (305) 362-9554 Daytime Phone #