1. Corporation Name



DOCUMENT # **P9400079077** 

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 31, 1999 8:00 am Secretary of State

03-31-1999 90050 047 \*\*\*150.00

GREENS	STEM INC.					0)(; )06( <u>0</u> )0(() 40(i) 17	<b>19</b> 11 <b>  1911   188</b> 1
Principal Place	e of Business	Mailing Address			4 (CA) ICA I DA I DITE BIRLI CONTIC CONTIC	Matt EBAIM Ameri in	9911 1991 1951
337 S.W. 20TH ROAD 337 S.W. 20TH ROAD MIAMI FL 33129 MIAMI FL 33129					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed	THO OF FICE	
					10/27/1994		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Арр	lied For
21					65-0531258		Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	<b>\$8.75</b> Ac Fee Req		
City & State	е	- City & State	City & State		6. Election Campaign Financing	\$5.00 N	
23		28		Trust Fund Contribution	Added to	Fees	
Žip	Country	Zip	Country	!	8. This corporation owes the current year		No
24	25   29   9. Name and Address of Current Registered Agent		30		Personal Property Tax.  10. Name and Address of New Register		700
	9, Name and Address of Currer	it Registered Agent	81	Name	10. Haine and Address of New Register	<u></u>	
CAR	DENAS, JORGE			21	Alexa (D.O. Davidue has in Net Assertable)		
337	S.W. 20TH ROAD		82	Street A	ddress (P.O. Box Number is Not Acceptable)		
MIAN	VII FL 33129		83				
		<del></del>	84	City		85 Zip C	ode
				'		-L	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statutes, of Florida. Such change was auth tions of, Section 607.0505, Florida 100.0000   100.0000000   100.00000000000	the above orized by a Statutes	e-named co the corpor s.	orporation submits this statement for the purpos- ation's board of directors. I hereby accept the ap-	e of changing its repointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered age	ANOTE: D	interest Ages	nt signature soo	quired when reinstating) DATE	· · · · · · · · · · · · · · · · · · ·	
12.		ID DIRECTORS	13.	iit algiiature rac	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE			1.1 TITLE			Change	☐ Addition
NAME			1.2 NAME				
STREET ADDRESS	337 S.W. 20TH ROAD		1.3 STREET ADDRESS				
CITY+ST-ZIP	MIAMI FL 33127		1.4 CITY-ST-ZIP			· ` `	
TITLE ~			2.1 TITLE			Change	Addition
NAME	221		2.2 NAME		•		
STREET ADDRESS			2.3 STREE	TADDRESS	•		
CITY-ST-ZIP			2.4 CITY-S	ST-ZIP			
TITLE			3.1 TITLE		<u></u>	☐ Change	☐ Addition
_ NAME.			3.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP		☐ DELETE	3.4. CITY-5 4.1 TITLE	SI-ZIP	<u> </u>	☐ Change	Addition
TITLE			4,2 NAME				_ [
NAME STREET ADDRESS	-		•	TADORESS			
CITY-ST-ZIP			4.4 CITY-S	1			
TITLE		DELETE	5.1 TITLE			☐ Change	Addition
NAME			5.2 NAME				
STREET ADDRESS	Į.		5.3 \$TREE	T ADDRESS			į
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		_	☐ Change .	Addition
NAME			6.2 NAME	ļ		•	
STREET ARABESS			6.3 STREE	TADDRESS			ł

C/TY-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 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from an appear with an address, with all other like empowered.

64 CITY-ST-ZIP

SIGNATURE:

REQUIRED E OF SIGNING OFFICER OR DIRECTOR