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62 NAME 61 ADDRESS 61 ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP 1 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental anomal report is true and that we income shall here the same lengt of fact on the medi-	Pursuant to or registere familiar with NATURE E ELADDRISS -SL-7/P E ELADDRESS -ST-7/P E ELADDRESS -ST-7/P E ELADDRESS -ST-7/P E ELADDRESS -ST-7/P	o the provisions of Sections 607. of agont, or both, in the State of h, and accept the obligations of, Signation, fixed or printed name of negacined OFFICE RS D ILLUECA, ADAN A 782 NW LEJEUNE RD	Social For Jocks, For	DELETE DELETE DELETE	the above-nemod corporation's bo Bigesteriod Agent signature result 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO 1	DATE DATE DEFICERS AND	DIRECTC DIRECTC Change Change Change	egistered offic l agont. Fam Addition Addition
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I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is the and accurate and that my signature shall have the same lead offect as it media under	Pursuant to or registere familiar with NATURE s E E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P E ELADDRESS ST-7/P	o the provisions of Sections 607. of agont, or both, in the State of h, and accept the obligations of, Signation, fixed or printed name of negacined OFFICE RS D ILLUECA, ADAN A 782 NW LEJEUNE RD		DELETE DELETE DELETE DELETE	the above-nemod corporation's bo by the corporation's bo 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 C TY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	ADDITIONS/CHANGES TO 1	purpose of cha appointment as DATE DEFICERS AND C	DIRECTC DIRECTC Change Change Change	egistored offic Lagont, Fam PRS IN 12 Addition Addition Addition
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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	Pursuant to or registore familiar with SNATURE E E E E E E E E E E E E E E E E E E	o the provisions of Sections 607. cd agont, or both, in the State of h, and accept the obligations of, Synthes, bred or pentid name of registring OFFICEFRS D RLUECA, ADAN A 782 NW LEJEUNE RD MIAMI FL 33126		DELETE DELETE DELETE DELETE DELETE	the above-nemod corporation's booms by the corporation's booms booms by the corporation's booms by the corporation's booms by the corporation's booms booms booms by the corporation's booms booms booms by the corporation's booms booms by the corporation's booms booms by the corporation's booms booms booms booms by the corporation's booms boo	ADDITIONS/CHANGES TO (ADDITIONS/CHANGES TO (700001.6 -05/23/960 ****208.75	purpose of cha appointment as DATE DEFICERS AND CFICERS AND C C DEFICERS AND C DATE DATE DATE DATE DATE DATE DATE DATE	DIRECTC DIRECTC Change Change Change Change	egistered office ragent. Fam Fits IN 12 Addition Addition Addition Addition Addition Addition

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