COR AN NU	PROFIT PORATION JAL REPORT 1999			ine Harr	is e		Apr 28, Secreta 04-28-1999		9 8:00 of Sta	
1. Corporation	MENT # P Name NE ROPE SUPPI		9233							
Principal P acc 5210 S.W. 172 #IAMI FL 3318;	ST	1:	Aailing Address 5210 S.W. 172 ST IIAMI FL 33187				DO NOT WF			
	lace of Business		a. Mailing Address			4. FEI Nur			·	lied For
1 Suite, Apt.	#	26	Suite, Apt. #, etc.				97616		88.75 A	Applicable
2	<i>n</i> , e.e.	27	۰ ۲			5. Certifca	te of Status Desired	Ă	Fee Re	
City & State	e	28	City & State				Campaign Financing und Contribution		\$5.00 Added to	
Zip	Cour		Zip	Cou	ntry -		rporation owes the cu	rrent year		Mu.
1	25	29 ress of Current Regi	L	30		L	al Property Tax. and Address of New	Registere	d Agent	X No
					81 Name					
	rra, juan B 0 s.w. 172 st				82 Street Add	dress (P.O. Bo)	Number is Not Accep	table)		
	0 0.11. 1/2 01									
MIAN					83					
MIAN	MI FL 33187				83					
44 - Durana - 4	AI FL 33187	ctions 607.0502 and	607,1508, Florida Statu	tes, the a	84 City	rporation submit	s this statement for th	F e purpose	of changing its	eaistered
11. Pursuant office or r agent. I a SIGNATUF:E	AI FL 33187	th, in the State of Flor coept the obligations of the of registered agent and title		authorized orida Statu	84 City	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	of changing its ointment as reg	registered jistered
11. Pursuant office or n agent. I a SIGNATUF:E 12.	Al FL 33187	th, in the State of Flor cept the obligations of	rida. Such change was of, Section 607.0505, Fl e if applicable. (NOT	authorized orida Statu	84 City pove-named com by the corporat ites.	tion's board of d	s this statement for th irectors. I hereby acc DNS/CHANGES TO O	e purpose ept the app DATE	of changing its ointment as reg	registered jistered
I1. Pursuent office or r agent. I a SIGNATUF:E I2. MLE	AI FL 33187 to the provisions of S- egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS	authorized prida Statu E Registered	84 City Dove-named comportation by the corportation tes. Agent signature require	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	C of changing its iointment as reg	registered jistered
1. Pursuant office or r agent. I a SIGNATUF:E 2. 	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS	E Registered 13. 1.1 TI 1.3 ST	84 City pove-named composed by the corporative by the corporative by the corporative by the corporative by the corporative the	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	C of changing its iointment as reg	registered jistered
11. Pursuant office or r agent. I a SIGNATUF:E 2. ITLE AME TREET ADDRESS ITY-ST-ZIP	AI FL 33187 to the provisions of S- egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS	E Registered 13. 1.1 TI 1.3 ST	84 City Dove-named cou by the corporat ites. Agent signature require require ME REET ADDRESS IY- ST-ZIP	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	C of changing its iointment as reg	registered jistered
1. Pursuant office or r agent. I a SIGNATUF:E 2. TLE AME TREET ADDRESS ITY-ST-ZIP TLE	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, Fl e if applicable. (NOT ECTORS	E Registered 13. 1.1 TI 1.2 NA 1.3 ST	84 City pove-named correction by the corporative required in the corpor	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its iointment as reg	egistered jistered EtS IN 12
1. Pursue nt office or r agent. I a SIGNATUF:E 2. TILE AME TREET ADDRE SS ITY-ST-ZIP TILE AME	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, Fl e if applicable. (NOT ECTORS	authorized prida Statu ERegistered 13. 1.1 TII 12 NA 1.3 ST 1.4 CC 2.1 TII 22 NA 2.3 ST	84 City 90ve-named correction by the corporative required in the set of	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its iointment as reg	egistered jistered EtS IN 12
1. Pursue nt office or r agent. I a SIGNATUF:E 2. TRE AME TREET ADDRE SS TTY-ST-ZIP STREET ADDRE SS STREET ADDRE SS	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, Fl e if applicable. (NOT ECTORS	authorized prida Statu ERegistered 13. 1.1 TII 12 NA 1.3 ST 1.4 CC 2.1 TII 22 NA 2.3 ST	84 City 90ve-named correction by the corporative required Agent signature required Agent signature required ILE ME REET ADDRESS TY-ST-ZIP TY-ST-ZIP	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its iointment as reg	egistered jistered EtS IN 12
11. Pursue nr office or r agent. I a SIGNATUF:E 12. ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE ITREET ADDRE SS STREET ADDRE SS STREET ADDRE SS ITY-ST-ZIP	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE	authorized authorized rida Statu 13. 1.1 TIT 1.2 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CC	84 City 90ve-named coll by the corporation by the corporation Agent signature required Ite ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its ointment as reg	egistered jistered ItS IN 12
1. Pursue nt office or n agent. I a SIGNATUF:E 2. TRE AME TREET ADDRE SS ITY-ST-ZIP TRE TREET ADDRE SS iTY-ST-ZIP TRE TREET ADDRE SS iTY-ST-ZIP TRE AME	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE	2.11001/2200 2.1101200 2.11111 2.11111 2.1111 2.1111 2.1111 2.12111 2.1211 2.1211 2.1211 2.1211 2.1211 2.1211 2	84 City 90ve-named coll by the corporative by the corporative Ites. Agent signature require Ite ME REET ADDRESS TY-ST-ZIP Ite ME REET ADDRESS TY-ST-ZIP Ite ME REET ADDRESS	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its ointment as reg	egistered jistered ItS IN 12
1. Pursue nt office or r agent. I a SIGNATUF:E 2. TILE AME TREET ADDRE SS TTY-ST-ZIP TILE AME TREET ADDRE SS TTY-ST-ZIP TREET ADDRE SS TTY-ST-ZIP	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE	2 Authorized 2 Registered 13. 1.1 TIT 1.2 № 1.3 ST 1.4 CC 2.1 TIT 2.2 № 2.3 ST 2.4 CC 3.1 TIT 3.2 № 3.3 ST 3.4, CC	84 City 90ve-named coll by the corporation by the corporation Ites. Agent signature requirements Agent ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	Of changing its ointment as reg	egistered jistered ItS IN 12
II. Pursue nt office or r agent. I a SIGNATUF:E IZ. ITLE IAME TREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP ITLE	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE	2.11001/2200 2.1101200 2.11111 2.11111 2.1111 2.1111 2.1111 2.12111 2.1211 2.1211 2.1211 2.1211 2.1211 2.1211 2	84 City 90ve-named coll by the corporative by the corporative ites. Agent signature required Agent signature requ	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	of changing its ointment as reg AND DIRECTO Change Change	egistered jistered <u>EtS IN 12</u> Addition
I1. Pursue nt office or r agent. I a SIGNATUF:E I2. ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE IAME	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4. CC 4.1 TI 4.2 NA	84 City 90ve-named coll by the corporative by the corporative ites. Agent signature required Agent signature requ	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	of changing its ointment as reg AND DIRECTO Change Change	egistered jistered <u>EtS IN 12</u> Addition
I1. Pursue nt office or r agent. I a SIGNATUF:E I2. ITLE IAME TREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4. CC 4.1 TI 4.2 NA 4.3 ST	84 City Dove-named coll by the corporative required Ites. Agent signature required Ites. ME REET ADDRESS TY-ST-ZIP LE ME REET ADDRESS TY-ST-ZIP	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	changing its ointment as reg AND DIRECTO Change Change Change	egistered gistered Et <u>S IN 12</u> Addition
11. Pursue nt office or r agent. I a office or r agent. I a SIGNATUF:E 12. ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE IAME STREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE ITLE ITLE ITLE ITLE ITREET ADDRE SS ITY-ST-ZIP ITLE ITLE ITLE ITHE ITHE <tr< td=""><td>All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S</td><td>th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR</td><td>ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE</td><td>Authorized Drida Statu 13. 1.1 TI 12 № 1.3 ST 1.4 CF 2.1 TI 2.2 № 2.3 ST 2.4 CC 3.1 TI 3.2 № 3.3 ST 3.4. CC 4.1 TI 4.2 № 3.3 ST 3.4. CC 4.1 TI 4.2 № 4.3 ST</td><td>84 City Dove-named composition by the corporation by the corporation Ites. Agent signature required Ite ME REET ADDRESS TY-ST-ZIP Ite</td><td>tion's board of d</td><td>irectors. I hereby acc</td><td>e purpose ept the app DATE</td><td>of changing its ointment as reg AND DIRECTO Change Change</td><td>egistered jistered <u>EtS IN 12</u> Addition</td></tr<>	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE	Authorized Drida Statu 13. 1.1 TI 12 № 1.3 ST 1.4 CF 2.1 TI 2.2 № 2.3 ST 2.4 CC 3.1 TI 3.2 № 3.3 ST 3.4. CC 4.1 TI 4.2 № 3.3 ST 3.4. CC 4.1 TI 4.2 № 4.3 ST	84 City Dove-named composition by the corporation by the corporation Ites. Agent signature required Ite ME REET ADDRESS TY-ST-ZIP Ite	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	of changing its ointment as reg AND DIRECTO Change Change	egistered jistered <u>EtS IN 12</u> Addition
1. Pursue nt office or r agent. I a SIGNATUF:E 2. TLE AME TREET ADDRE SS ITY-ST-ZIP ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE AME	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE DELETE	E: Registered 13. 1.1 TI 1.2 NA 1.3 ST 1.4 CT 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4. CC 4.1 TI 4.2 NA 4.3 ST 4.4 CT 5.1 TI 5.2 NA	84 City Dove-named composition by the corporation by the corporation Ites. Agent signature required Ite ME REET ADDRESS TY-ST-ZIP Ite	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	changing its ointment as reg AND DIRECTO Change Change Change	egistered gistered Et <u>S IN 12</u> Addition
11. Pursue nt office or r agent. I a SIGNATUF:E 2. ITLE AME TREET ADDRE SS ITY-ST-ZIP ITLE IAME ITREET ADDRE SS ITY-ST-ZIP ITLE ITREET ADDRE SS ITY-ST-ZIP ITLE ITREET ADDRE SS ITY-ST-ZIP ITLE ITREET ADDRE SS ITY-ST-ZIP	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE	2 Authorized 2 Registered 13. 1.1 TIT 1.2 № 1.3 ST 1.4 CT 2.1 TIT 2.2 № 2.3 ST 2.4 CC 3.1 TIT 3.2 № 3.3 ST 3.4. CC 4.1 TIT 4.2 № 4.3 ST 4.4 CT 5.1 TIT 5.2 № 5.3 ST 5.4 CT	84 City Dove-named component of the corporation	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE		egistered gistered ES IN 12 Addition Addition Addition Addition
11. Pursue nt office (ir r agent. a SIGNATUF:E 12. ITLE IAME STREET ADDRE SS STY-ST-ZIP ITLE VAME STREET ADDRE SS CITY-ST-ZIP ITLE VAME STREET ADDRE SS CITY-ST-ZIP ITLE STREET ADDRE SS CITY-ST-ZIP ITLE STREET ADDRE SS CITY-ST-ZIP ITLE STREET ADDRE SS CITY-ST-ZIP ITLE	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was f, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE DELETE DELETE DELETE	authorized orida Statu 13. 1.1 TTT 1.2 № 1.3 ST 1.4 CT 2.1 NP 2.1 NP 2.3 ST 2.4 CC 3.1 TTT 3.2 NP 3.3 ST 3.4. CC 4.1 TTT 4.2 NV 4.3 ST 4.4 CT 5.1 TTT 5.3 ST	84 City Dove-named cxii by the corporation by the corporation Ites. Agent signature required Ites. REET ADDRESS TY-ST-ZIP Ite ME REET ADDRESS TY-ST-ZIP Ite	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE	changing its ointment as reg AND DIRECTO Change Change Change	egistered gistered Et <u>S IN 12</u> Addition
11. Pursue nt office (ir r agent. a SIGNATUF:E 12. ITTLE IAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME STREET ADDRE SS CITY-ST-ZIP ITTLE VAME	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with; and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S	th, in the State of Flor cept the obligations of me of registered agent and titl OFFICERS AND DIR	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE	authorized prida Statu 13. 1.1 TIT 12 № 1.3 ST 1.4 CT 2.1 TIT 2.2 № 2.3 ST 2.4 CC 3.1 TIT 3.2 № 4.3 ST 3.4. CC 5.1 TIT 5.2 № 5.3 ST 5.4 CT 6.1 TIT 6.2 №	84 City Dove-named cxii by the corporation by the corporation Ites. Agent signature required Ites. REET ADDRESS TY-ST-ZIP Ite ME REET ADDRESS TY-ST-ZIP Ite	tion's board of d	irectors. I hereby acc	e purpose ept the app DATE		egistered gistered ES IN 12 Addition Addition Addition Addition
11. Pursue nt office or n agent. I a soffice or n agent. I a SIGNATUF:E 12. ITLE VAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE VAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE NAME STREET ADDRE SS CITY-ST-ZIP TITLE <t< td=""><td>Al FL 33187 to the provisions of Se egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S MIAMI FL 33187</td><td>th, in the State of Flor scept the obligations of the of registered agent and titk OFFICERS AND DIR ST</td><td>ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE</td><td>2 Authorized 2 Registered 13. 1.1 TIT 1.2 № 1.3 ST 1.4 CT 2.1 TIT 2.1 TIT 2.2 № 2.3 ST 2.4 CC 3.1 TIT 3.2 № 3.3 ST 3.4. CC 4.1 TIT 4.2 № 4.3 ST 5.4 CT 5.1 TIT 5.2 № 5.3 ST 5.4 CT 6.1 TIT 6.2 № 6.3 ST 6.4 CT</td><td>84 City Dove-named component by the corporation of the corporation</td><td>tion's board of d</td><td>INS/CHANGES TO O</td><td>e purpose ept the app pare FFICERS</td><td>change Change Change Change</td><td>egistered gistered ES IN 12 Addition Addition Addition Addition Addition</td></t<>	Al FL 33187 to the provisions of Se egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S MIAMI FL 33187	th, in the State of Flor scept the obligations of the of registered agent and titk OFFICERS AND DIR ST	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE	2 Authorized 2 Registered 13. 1.1 TIT 1.2 № 1.3 ST 1.4 CT 2.1 TIT 2.1 TIT 2.2 № 2.3 ST 2.4 CC 3.1 TIT 3.2 № 3.3 ST 3.4. CC 4.1 TIT 4.2 № 4.3 ST 5.4 CT 5.1 TIT 5.2 № 5.3 ST 5.4 CT 6.1 TIT 6.2 № 6.3 ST 6.4 CT	84 City Dove-named component by the corporation of the corporation	tion's board of d	INS/CHANGES TO O	e purpose ept the app pare FFICERS	change Change Change Change	egistered gistered ES IN 12 Addition Addition Addition Addition Addition
11. Pursue nt office or r agent. I a selfice or r agent. I a SIGNATUF:E 12. ITLE IAME STREET ADDRE SS CITY-ST-ZIP ITLE VAME STREET ADDRE SS <td>All FL 33187 to the provisions of Se egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S MIAMI FL 33187</td> <td>th, in the State of Flor scept the obligations of <u>re of registered agent and the</u> <u>OFFICERS ANI 2 DIR</u> 3 5 5 7 </td> <td>ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE</td> <td>authorized 13. 13. 1.1 TIT 12 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CC 3.1 TIT 3.3 ST 3.4 CC 4.1 TIT 4.2 NA 4.3 ST 5.4 CT 5.3 ST 5.4 CT 6.1 TIT 6.2 NA 6.3 ST 6.4 CT</td> <td>84 City Dove-named cxi by the corporatives. Agent signature required Ites. Agent signature required ME REET ADDRESS TY-ST-ZIP Ite ME <td< td=""><td>Section 119.07</td><td>(3)(i), Florida Statutes</td><td>e purpose ept the app DATE FFICERS</td><td>AND DIRECTO Change Change Change Change Change Change Change Change Change Change</td><td>egistered sistered ES IN 12 Addition Addition Addition Addition Addition</td></td<></td>	All FL 33187 to the provisions of Se egistered agent, or bo m familiar with, and ar Signature, typed or printed ha PD CEARRA, JUAN E 15210 S.W. 172 S MIAMI FL 33187	th, in the State of Flor scept the obligations of <u>re of registered agent and the</u> <u>OFFICERS ANI 2 DIR</u> 3 5 5 7 	ida. Such change was of, Section 607.0505, FI e if applicable. (NOT ECTORS DELETE	authorized 13. 13. 1.1 TIT 12 NA 1.3 ST 1.4 CT 2.1 TIT 2.2 NA 2.3 ST 2.4 CC 3.1 TIT 3.3 ST 3.4 CC 4.1 TIT 4.2 NA 4.3 ST 5.4 CT 5.3 ST 5.4 CT 6.1 TIT 6.2 NA 6.3 ST 6.4 CT	84 City Dove-named cxi by the corporatives. Agent signature required Ites. Agent signature required ME REET ADDRESS TY-ST-ZIP Ite ME <td< td=""><td>Section 119.07</td><td>(3)(i), Florida Statutes</td><td>e purpose ept the app DATE FFICERS</td><td>AND DIRECTO Change Change Change Change Change Change Change Change Change Change</td><td>egistered sistered ES IN 12 Addition Addition Addition Addition Addition</td></td<>	Section 119.07	(3)(i), Florida Statutes	e purpose ept the app DATE FFICERS	AND DIRECTO Change Change Change Change Change Change Change Change Change Change	egistered sistered ES IN 12 Addition Addition Addition Addition Addition