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1997

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4/17/97

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000064758 (2)

C.F. TRUST, INC. rincipal Place of Business Mailing Address VALENCIA AVENUE ORAL GABLES FL 33134 CORAL GABLES FL 33134-5806										
				08/22		Qualified		of Last R 1/1996	eport	
. Principal Place of Business	2a. Mailing Addre	SS		4. FEI Nu	mber LIED FOR	65-06	11168	- 4	plied For	
Suite, Apt. #, etc.	26 Suite, Apt. #. 6	etc.		AFF	CIED FOR			\$8.75 /	t Applicable	
	27			5. Certific	ate of Status D	esired	-	Fee Re		
City & State	City & State			l l	n Campaign Fir	_		\$5.00 Added		
Zip Country	Zip	Coun	try		rporation has I		ntangible ta			
25	29	30		Florida	Statutes		Yes 🙀	No		
g, Name and Address of	Current Registered Agent		1 Name	10. Name	and Address (of New Reg	jistered Ag	gent		
MILLER, GEORGE		ľ	1 Name							
250 VALENCIA AVENUE CORAL GABLES FL 33134		Ţĕ	82 Street Address (P.O. Box Number is No				le)			
CORAL GABLES FL 33134		t _e	13			·				
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		Įŧ	City				FL	85 Zip (Code	
		,						ļ	e registeres	
1. Pursuant to the provisions of Sections 6	07.0502 and 607.1508, Florida	a Statutes, the abo	ve named	corporation subm	ts this statemen	nt for the pu	urpose of c	hanging it	ra i eñistoi en	
Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent, I am familiar with, and accept the control of the control o	07.0502 and 607.1508, Florida e State of Florida. Such chang e obligations of Section 607.0	a Statutes, the abo ge was authorized 1505. Florida Statu	by the corp	corporation submi poration's board of	ts this statement directors. I her	nt for the pu reby accep	urpose of c it the appoi	hanging it intment as	registered	
Pursuant to the provisions of Sections 6 office or registered agent, or both, in the agent. I am familiar with, and accept the SIGNATURE:	07.0502 and 607.1508, Florida e State of Florida. Such chang e obligations of, Section 607.0	a Statutes, the abo ge was authorized 605, Florida Statu	by the corp tes.	corporation submi poration's board of	ts this statement directors. I her	nt for the pureby accep	urpose of c it the appoi	hanging it intment as	registered	
SIGNATURE Signature, typed or practed name of regis	stured agent and title if applicable			corporation submi coration's board of required when reinstating		nt for the pureby accep	urpose of c it the appoi	hanging it	registered	
Signature: typed or prateo name of regis 2. OFFICE:	stered agent and title if applicable	(NOTE: Registered a	Agent signature	required when reinstaling			DATE ERS AND [DIRECTOR	RS IN 12	
Signature: Signature, typed or period name of regis 2. OFFICE: ILE DPT	stured agent and title if applicable	(NOTE: Registered . 13. ETE 1.1 TITL	Agent signature	required when reinstaling)		DATE ERS AND [RS IN 12	
Stgrahm, typed or period name of regs 2. OFFICE THE DPT MILLER, GEORGE	stered agent and title if applicable	(NOTE: Registered	Agent signature	required when reinstaling)		DATE ERS AND [DIRECTOR	RS IN 12	
Signature: Specific parties name of register. 2. OFFICE: THE DPT MILLER, GEORGE TREET ADDRESS 250 VALENCIA AVENUE	stured agent and title if applicable RS AND DIRECTORS	(NOTE: Registered 13. ETE 1.1 TITL 1.2 NAM 1.3 STR	Agent signature E HE EET ADDRESS	required when reinstaling)		DATE ERS AND [DIRECTOR	RS IN 12	
2. OFFICE: ILE DPT MILLER, GEORGE IREET ADDRESS CORAL GABLES FL 331:	stured agent and little if applicable RS AND DIRECTORS	(NOTE: Registered / 13. ÉTE 1.1 TITL 1.2 NAN 1.3 STR 1.4 CITY	Agent signature E HE EET ADDRESS (-ST-ZIP	required when reinstaling)		DATE ERS AND D	DIRECTOR J Change	RS IN 12	
SIGNATURE Signature, typied or peaded name of regis COFFICE DPT MILLER, GEORGE 174-ST-ZIP CORAL GABLES FL 3313 V	stured agent and title if applicable RS AND DIRECTORS	(NOTE: Registered 13. ETE 1.1 TITL 1.2 NAN 1.3 STR 1.4 CIT) ETE 21 TITL	Agent signature E IE EET ADDRESS '-ST-ZIP E	required when reinstaling)		DATE ERS AND D	DIRECTOR	RS IN 12	
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David C. Hennessy