DOCL 1. Entity Na	1 UNIFORM BUS JMENT # P9600000			BR)	FIL May 23, 20 Secretary 05-23-2001 9118	001 8:00 am of State
-'rincipal Place of Business Mailing Address 100 N. Biscayne Blvd. 100 N. Bisca 21st Floor 21st Floor Miami, FL 33132-2306 Miami, FL			-			
2. Principal Place of Business 3		3. Mailing Address				
Suite, Apt. # etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State		4.	4. FEI Number Applied For 65-0634292 Not Applicable	
Zip	Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Current F	egistered Agent	Name	7. (Name and Address of New Registere	
Baur, Thomas c/o Baur, Miller & Webner, P.A. 100 N. Biscayne Blvd., 21st Floor Miami, FL 33132-2306			Street	Street Address (P.O. Box Number is Not Acceptable) Baur, Klein, Matos & Riedi, P.A.		
Mia	mi, FL 33132-2306		City		F	L Zip Code
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: 9. This corpora: on is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria in back) FiLE NOW!!!			Fee will be \$	00 550.00	10. Election Campaign Financing	\$5.00 May Be Added to Fees
11.	OFFICERS AND D	<u> </u>	12.	~ ~ ~	DITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 11
TITLE NAME Stheet address Of Y-Si Zip	D HOLTSCHLAG, ADOLF 100 N. BISCAYNE B MIAMI, FL 33132-2		TITLE NAME STREET ADDRESS CITY - ST - ZIP	100 N.	KE, INGRID BISCAYNE BLVD., FL 33132-2306	Change X Ad Jition 60 21st Fl. 80 Change X Advition 22
TITLE NATAE STHEET ADDRESS CIT 7- STH ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOLTSC 100 N.	HLAG, SABINE	Change X Advillion X 21st Fl.
THLE NAME Stheet address Chi*- St- Zip		Delete	VITLE NAME STREET ADDRESS CHTY-ST-ZIP		<u>. FU_33I32=2306</u>	Change Adultion
TIT E NAME Street address City-St-Zip		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition
TITIE NALJE STF-EET ADDRESS CIT+-ST-71P		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		Delete	TITLE NAME STRFET ADDRESS CITY - ST - ZIP			Change Add tion
mulualeu i		e and accurate and that my	gnature shall ha equired by Cha	ave the same le pter 607, Florid	gai effect as if made under oath; that I a Statutes; and that my name appears i APRIL 24, 2001 305/3	am an officer or director n Block 11 or Block 12 if