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DOCUMENT # P96000095560 1. Corporation Name CIB Financial, Inc. Principal Place of Business o/o Intrastate Reg. Agent Corp. 701 Brickell Avenue Miaml, FL 33131 Miaml, FL 33131 CIB Financial, Inc. Mailing Address c/o Intrastate Reg. Agent Corp. 701 Brickell Avenue Miaml, FL 33131 Do Not Write In This space 3. Date Incorporated or Qualified 11/22/98 3. Date of Last Report 5/5/97 Applied For	ANNUAL REPORT Secretary				RTMENT OF STATE B. Mortham ary of State CORPORATIONS			FILED CO AND SO BY 1-10				
Description of Business Colonitarists Reg. Agent Corp. Tot Brickell Avenue Mismir, Pt. 33131 Substitute Pt. 23 Action Pt. 24 Pt. 24 Pt. 25 Pt.	DOCUMENT # P96000095560					SC APR 29 FM 1: 19 SECRED OF STATE TALLANDERES, PLORIDA						
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The content of the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing includes a registered agent. I am familier with, and accept the obligations of, Section 607.0505, Florids Statutes 8 Section 607.0505, Florids Statutes 9 Section 607.0505, Florids Statutes 8 Section 607.0505, Florids Statutes 8 Section 607.0505, Florids Statutes 8 Section 607.0505, Florids Statutes 9 Section	701 Brickell Avenue 701 Brickell							Date Incorporated or Qualified 3a. Date of Last Report				
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this is statement for the purpose of changing in registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both purpose or changing in registered agent agent and use it applications of, Section 607.0505, Florida Statutes 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. TITLE 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. CITY-5T-2IP 17. EVAILABLE TO DIRECTORS IN 12 18. TITLE 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 20. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. TITLE 21. TITLE 22. TITLE 22. TITLE 23. STREET ADDRESS 24. OFFICERS AND DIRECTORS 23. STREET ADDRESS 24. OFFICERS AND DIRECTORS 25. TITLE TO THE TO THE ADDRESS 26. OFFICERS AND DIRECTORS 27. TITLE 28. TITLE 29. ANAME 29. STREET ADDRESS 20. OFFICERS AND DIRECTORS 20. TITLE TO THE ADDRESS 20. OFFICERS AND DIRECTORS 20. STREET ADDRESS 20. OFFICERS AND DIRECTORS 21. TITLE 22. TITLE 23. STREET ADDRESS 24. OFFICERS AND DIRECTORS 25. TITLE TO THE ADDRESS 26. OFFICERS AND DIRECTORS 27. TITLE 27. ADDITIONS/CHANGES		County	Zip	Cou	unty	-	8. 1	This corporation has liability for inte				
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Street Address (P.O. Box Number is Not Acceptable) B1		9. Name and Address of	Current Registered	Agent	:			10. Name and Address of No	w Regist	ered Agent		
Recommendation Reco		red Agent Corp.			81	Name		· •				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Floride Statutes, the above-named corporation submits this acterment for the purpose of changing i registered diffee or registered agent, or both, in the State of Florida. Such change was authorized by the corporation is board of directors. I hereby accept the appointment as registered agent, I am familier with, and accept the obligations of, Section 607.0505, Florida Statutes SIGNATURE Signature, hyade of printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS I 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. OFFICERS AND DIRECTORS 11. TITLE 12. NAME 13. STREET ADDRESS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. CITY-ST-27P 17. TITLE 15. OFFICERS AND DIRECTORS I 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. TITLE 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. TITLE 10. OFFICERS AND DIRECTORS IN 12 11. TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. STREET ADDRESS 24. CITY-ST-27P 14. CITY-ST-27P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 25. TITLE 26. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 27. TITLE 28. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. TITLE 30. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 20. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 21. TITLE 22. NAME 23. STREET ADDRESS 34. CITY-ST-27P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition TITLE 40. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 18. TITLE 29. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition TITLE 30. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition TITLE 41. TITLE 42. ADAMAE 43. STREET ADDRESS 54. CITY-ST-27P 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					82	Street Address	(P.O.	Box Number is Not Acceptable)		., <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floride Statutes, the ebove-nermed corporation submits this statement for the purpose of changing i registered agent, or both, in the State of Floride. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Floride. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0805, Floride Statutes SIGNATURE Signature, typed or printed name of registered agent and trief with an accept the obligations of, Section 607.0805, Floride Statutes SIGNATURE Signature, typed or printed name of registered agent and trief with a sportcable (NOTE Registered Agent alignature received when releasingly) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE Brody, Carl 11 TITLE Drody, Carl 12 NAME 13 STREET ADDRESS 13 STREET ADDRESS 24 CITY-ST-ZIP TITLE NAME 22 I TITLE 22 NAME 33 STREET ADDRESS 24 CITY-ST-ZIP TITLE NAME 31 STREET ADDRESS 24 CITY-ST-ZIP TITLE NAME 33 STREET ADDRESS 34 CITY-ST-ZIP TITLE NAME 41 TITLE Change Addition STREET ADDRESS 35 STREET ADDRESS 44 CITY-ST-ZIP TITLE NAME 51 STREET ADDRESS 54 CITY-ST-ZIP TITLE Change Addition STREET ADDRESS 55 CITY-ST-ZIP TITLE 17 Change Addition STREET ADDRESS 56 CITY-ST-ZIP TITLE 17 TITLE 17 Change Addition STREET ADDRESS 57 STREET ADDRESS 5					81							
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SIGNATURE: Way Carl Broly President 4.28.98 SIGNATURE AND TYPED OR PRINTED NAME OF SUSHING OFFICER OR DIRECTOR Date Destine Phone #	further ceritfy that under oath; that I a	the information indicated on this a m an officer or director of the corp	innual report or suppl oration or the receive	emente r or tre	ei annu uatea a sa.	Jai report is true and Impowered to execu	d accr Ita this	uate and that my signature shall have report as required by Chapter 607, F	the same Torlds Stat	legal effect as if made lutes; and that my name		
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