2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 23, 2001 8:00 am

DOCU 1. Entity Na	IMENT # P9700		Secretary of State 05-23-2001 91162 031 ***150.00				
Principal Pla	noe of Business	Mailing Address					
7575	NW 74 16 AV.						
1	EY, Fla. 33166-242	2		7	70920		
	Place of Business NW 74 th Av.	3. Mailing Address	<u> خو سم م</u> موهی د	,			
Suite. Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE	DO NOT WRITE IN THIS SPACE		
City & Ste	AM, FLA.	City & State MIA HI	=21	4. FEI Number 65 - 072811.		Applied For Not Applicable	
ZIP 33166 ·	2422 Country USA	Zip 33/66-2422	Country USA	5. Certificate of Status Desired	S8.75 A	dditional	
6. Name and Address of Current Registered Agent ANTHONY LOTUNOD Name				7. Name and Address of New Re	gistered Agent		
10 C T C 1 1 24 AU				Carried Contraction			
MIAMI FLA 33166-Z4ZZ				ddress (P.O. Box Number is Not Acceptable)			
, ,,,,,,,,		-		1575 NW 74 TH A	r.		
			City	MIAMI	FL Zip Co	de - 24-2	
8. The above	e named entity submits this statement for	or the purpose of changing its	registered office or	registered agent, or both, in the State of Flori			
	Addition P. Toras		/ / /				
SIGNATURE	ANTHONY ROTUNDO Signature, typed or printed name of registeres spent	and life + applicable (NOT	E Registered Agent signatu	pte recovered when rewritting)	23/01 DATE		
Tax filing i	oration is eligible to satisfy its Intangible requirement and elects to do so. ris on back)	After MAY 1, 20 Make Check Payal	(1 Fee will be \$5	50.00	~	00 May Be ad to Fees	
11.	OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFIC			
TABLE HAME	ANTHONY ROTUNDO	Oeteta	TITLE NAME		Change	Addition	
STREET ADDRESS	7575 NW 74TH AV MIAMI FLA 3316	,	STREET ADDRESS				
CITY-ST-ZIP	MIAMI FLA 3316		CITY-ST-ZIF				
TIFLE NAME		☐ Delete	TITLE NAME		Change	□ Addition	
STREET ADDRESS			STREET ADDRESS				
OffY-ST-ZIP			CITY-ST-ZIP				
TUTE		☐ Delete	THILE		☐ Change	Addition	
NAME STREET ADDRESS			name Street address				
City-ST-ZIP			CITY-\$1-ZEP				
HILE	-	Delete	TITLE		Change	[] Addition	
NAME ATRICE APPRESS			MAME				
STPEET ADDRESS CITY-51-20P			STREET ADDRESS GHY-ST-ZIP				
TITLE		CJ Delete	TIFLE		☐ Change	Addition	
NAME		مسده والمهاريل	NAME	·	C) Cuorde	CT MADMIN	
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CiTY-ST-ZIP			<u></u>	
TOTLE NAME		☐ Delets	TITLE		☐ Change	Addition	
STREET ADDRESS			STREET ADDRESS				
Ç() ४-5१-राम			CITY-ST-ZIP				
13. Thereby c	ertily that the information supplied with	this filing does not qualify for	the exemption state	ed in Section 119.07(3)(i), Florida Statutes, I tu	that certify that the i	nforms!!cn	

indicated on the report or supplemental report is true and accurate and that missing does not qualify for the exemption stated in Section 119.07(3)(f). Honda Statutes: I further certify that the information indicated on the report or supplemental report is true and accurate and that missing time shall have the same legal effect as if made under eath, 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 appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like impowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNAND OFFICER OR DIRECTOR

ANTHONY Rotundo