2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P97000015211 1. Entity Name CCI OF VERO, INC.

FILED Apr 18, 2000 8:00 am Secretary of State 04-18-2000 90068 031 ***150.00

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Suite, Apt. II. etc. Suite, Apt. II. etc. Suite, Apt. II. etc. Suite, Apt. II. etc. Application for properties of Clay & State	INDIAN RIVER MALL 6200 20TH STREET ROOM 496 VERO BEACH FL 32966 US			SUITE #106-B BOCA RATON FL 33431-7260					1011) 1 87 11 87 11 8	i ii) ot ili co i o i	#1 68) 6 3/4 0 31 40 1 311	P P. 1/01 1001	
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BOCA RATON FL 33431 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE	2499 GLADES ROAD					Street Address (P.O. Box Number is Not Acceptable)							
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE Signature, Tread or printed name of legistered agent and tike if applicable (NOTE Registered Agent agents agents required when intentity) DATE				City					Zip Code	e			
SIGNATURE Signature. Need or printed harms of inquistored agent and list placebook RIOTE Registered Agent signature required when rentitating) DATE						<u> </u>				<u> </u>	<u>- </u>		
9. This corporation is eligible to satisfy its intangible Tax filting equilement and elects to do so After MAY 1, 2000 Fee with the \$\$50.00 Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME ALEXE GENESSE STREET CHEEKTOWAGA NY 14225 TITLE OPERATION OF STREET ADDRESS CITY-ST-2P TITLE ORDERS CITY-ST-2P TITLE	8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE												
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Indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 empowered.

SIGNATURE: