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4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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	 Pursuant office or agent. 1 a SIGNATURE C. TILE AME TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS ITY-ST-ZIP TREET ADDRESS TTY-ST-ZIP TTE AME TREET ADDRESS TTY-ST-ZIP TTE TREET ADDRESS 	registered agent, or both, am familiar with, and acce Signature, typed or printed name of OF CAHILL, TIMOTHY S 747 NE 195 STREET MIAMI FL 32179 VTS CAHILL, BARBARA C 747 NE 195 STREET	in the State of Florida. ept the obligations of, se of registered agent and title if app FICERS AND DIRECT	Such change was section 607.0505, F	Ites, the above-named corporat s authorized by the corporat -lorida Statutes. (NOTE: Registered Agent signature rec 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 8.1 TITLE 6.2 NAME 6.3 STREET ADDRESS	FL pration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered pured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition Change Addition	n n