and S W, 720 STREET       BUS S W, 720 STREET         SURE 111       SURE 111         MM R 1, 5378       MM R 1, 5378         Sule, Apt. 4, etc.       Sule, Apt. 4, etc.         City & Sile       City & Sile         Country       Zo         Country       Zo         Country       Zo         Country       Zo         Country       Zo         Country       Zo         Super Address of Non-Department Application in Mile Ap	2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P97000034646 1. Entity Name DEVEN HOLDING CORP.			FILED May 24, 2002 8:00 am Secretary of State 05-24-2002 91271 003 ***150.00
	Principal Place of Business 9415 S.W. 72ND STREET SUITE 111 MIAMI FL 33176	9415 S.W. 72ND STREET Suite 111		
City & Siste  C	۰ ۰			
Zip     Country     Zip     Country     Zip     Country     Status Dasing     Status Dasing <t< td=""><td>·</td><td></td><td></td><td>A FEI Number</td></t<>	·			A FEI Number
S. Cardificate of Status Desired      Cardific		· · · · · · · · · · · · · · · · · · ·	Country	65-1025594 Not Applicable
ARTIUM REGISTERED AGENTS, INC.     Name       1500 SAN REMO AVENUE     Street: Addiase (P.O. Box Number is Not Acceptable)       SUTE 125     Sute: Addiase (P.O. Box Number is Not Acceptable)       COPAL GABLES FL 33148     9415 Sunset Drive, Suite 111-A       Crit     Mammerit       Core     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Core     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Inter advisor     P415 Sunset Drive, Suite 111-A       Crit     Mammerit       Crit     P415 Sunset Drive, Suite 111-A       Crit     Crit       Crit     P415 Sunset Drive, Suite 111-A       Crit     Crit     P416 Street       Crit     P416 Street       Crit     Crit     P416 Street       Crit     Crit     P416 Street       Crit     Crit     P416 Street       Crit     Crit     P416 Street <tr< td=""><td></td><td></td><td></td><td>5. Certificate of Statos Desired Fee Required</td></tr<>				5. Certificate of Statos Desired Fee Required
The above name of this formatics the abuve into the purchase changing is registered affice or registered agent, or both, in the State of Florida.     The above hybrid or prederive including agent agent or the purchase is a state of Florida.     The above hybrid or prederive including agent agent agent agent, or both, in the State of Florida.     The corporation is eligible to State of Intra-     Tax fing requirement and elects to do so.     The corporation is eligible to State of Intra-     Tax fing requirement and elects to do so.     The corporation is eligible to State of Intra-     Tax fing requirement and elects to do so.     The corporation is eligible to State of Intra-     Tax fing requirement and elects to do so.     The corporation is eligible to State of Intra-     The market check Payabolis to Department of State     The Maximum C2, JORGE     The CPFICERS AND DIRECTORS     The CPFICERS AND DIRECTORS     The Maximum C2, JORGE     The Maximum C2, JORG	1500 SAN REMO AVENUE SUITE 125		Hen Street Addres 941	ess (P.O. Box Number is Not Acceptable) 15 Sunset Drive, Suite 111-A
Tax filting requirement and elects to do so.       After May 1, 2002 Fee will be \$550.00       10. Election Campaign Financing Stop Added to Fees         (See criteria on back)       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         Title       P/D       Int.E       Addition       Change Addition         RAKE       RAWICZ, JORGE       Int.E       Addition         RAKE       Siter Addess Status       Int.E       Int.E         RAWICZ, JORGE       Int.E       Int.E       Addition         RAWICZ, JORGE       RAWICZ, HELENA       Int.E       Int.E         RAWICZ, HELENA       Delete       Int.E       Addition         RET ADDRESS       9415 S.W. 72ND STREET/111       Int.E       Int.E         MAM       CEPERO, ELOY       Delete       Int.E       Int.E         MAM       Delete       Int.E       Int.E       Int.E       Int.E         MAM       CEPERO, ELOY       Int.E       Int.E       Int.E       Int.E       Int.E       Int.E	3. The above name dentity submits the statement fo		registered office or regis	pistered agent, or both, in the State of Florida. 4/25/02
ITLE P/D Grange   Addition Grand Construction Statutes, I further and Construction Statutes, I further certify that the information supplied with this filing coes not qualify for the exemption stated in Section 119.07(3)(0), Florida Statutes, I further certify that the information of the corporation of the corporati	Tax filing requirement and elects to do so. (See criteria on back)	After May 1, 20 Make Check Payab	02 Fee will be \$550.00	00 Trust Fund Contribution
AME       PAWICZ, HELENA       NAME         REET ADDRESS       STREET / 111       STRET ADDRESS         VIS 12/P       MIAMI FL 33176       CIY-ST-2/P         CEPERO, ELOY       Delete       1112         NAME       STRET ADDRESS       CIY-ST-2/P         MIAMI FL 33176       CIY-ST-2/P         THE       D       CEPERO, ELOY         9415 S.W. 72ND STREET/111       STRET ADDRESS         0415 S.W. 72ND STREET/111       STRET ADDRESS         0500000000000000000000000000000000000	ITLE P/D RAWICZ, JORGE TREET ADDRESS 9415 S.W. 72ND STREET/111		TITLE NAME STREET ADDRESS	
AME CEPERO, ELOY SITEST ADDRESS GEPERO, ALINA TY-ST-ZP CEPERO, ALINA CERCITADORES CITY-ST-ZP	AME RAWICZ, HELENA TREET ADDRESS 9415 S.W. 72ND STREET/111	Delete	NAME STREET ADDRESS	Change Addition
AME       CEPERO, ALINA       NAME         IREET ADDRESS       9415 S.W. 72ND STREET/111       STREET ADDRESS         IV-S1-ZIP       INAMI FL 33176       CITY-S1-ZIP         TLE       Delete       TITLE         MAME       STREET ADDRESS       CITY-S1-ZIP         ITREET ADDRESS       STREET ADDRESS         ITY-S1-ZIP       Delete       TITLE         MAME       STREET ADDRESS       CITY-ST-ZIP         ITY-S1-ZIP       Delete       TITLE         INEET ADDRESS       CITY-ST-ZIP       CITY-ST-ZIP         ILE       Delete       TITLE         MME       STREET ADDRESS       CITY-ST-ZIP         ILE       Delete       TITLE         NAME       STREET ADDRESS       CITY-ST-ZIP         ILE       Delete       TITLE         NAME       STREET ADDRESS       CITY-ST-ZIP         ILE       Delete       TITLE         NAME       STREET ADDRESS       CITY-ST-ZIP         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 report or supplemental leport 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	AME CEPERO, ELOY TREET ADDRESS 9415 S.W. 72ND STREET/111		NAME STREET ADDRESS	Change Addition
AME     NAME       IRRET ADDRESS     STREET ADDRESS       TY-ST-ZIP     CITY-ST-ZIP       TLE     Delete       MME     STREET ADDRESS       REET ADDRESS     CITY-ST-ZIP       AME     STREET ADDRESS       ITY-ST-ZIP     Delete       ITUE     Change       Addition       ME       STREET ADDRESS       ITY-ST-ZIP       3. 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 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 turbates impowered 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 addres, with all other like empowered.	AME CEPERO, ALINA TREET ADDRESS 9415 S.W. 72ND STREET/111	Delete	NAME STREET ADDRESS	Change Addition
AME       NAME         REET ADDRESS       STREET ADDRESS         TY-ST-ZIP       CITY-ST-ZIP         3. 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 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 impowered 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.	TLE AME TREET ADDRESS ITY- ST-ZIP	Delete	NAME STREET ADDRESS	Change Addition
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	of the corporation or the receiver or vustee ampo changed, or on an attachment with an address, v	true and accurate and that m wered to execute this report :	hy signature shall have th	the same legal effect as if made under gath; that I am an officer or director