

**FILED**  
**Jun 17, 2008 8:00 am**  
**Secretary of State**

DOCUMENT # P97000073014



Mailing Address  
7200 CORPORATE CENTER DR  
SUITE 600  
MIAMI, FL 33126 US

### 3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Country

06062008 Chg-P CR2E034 (12/06)

4. FEI Number  
65-0796178

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name \_\_\_\_\_

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 12, 2008**

**9. Election Campaign Financing Trust Fund Contribution.**

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Delete

 Delete

 Delete☐ Delete☐ Delete☐ Delete☒ Change    ☐ Addition☒ Change    ☐ Addition☐ Change    ☐ Addition☐ Change    ☐ Addition☒ Change    ☐ Addition☐ Change    ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Melissa Beckham

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

C616108

Date \_\_\_\_\_

305-500-2007

Daytime Phone #