FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED Mar 31 1998 8:00am

i	1998			Secretary of State DIVISION OF CORPORATIONS				Secretary of State				
1. Corporatio	MENT # on Name EARCH, INC.	P97000	09504	40 (6	3)							
Principal Plac	ce of Business		Mailing Ad	ddress					1811) WUIT 1811	DI MILIEI MADIL MAN	ii 30 (1 1 98 1	
	S. POLLAK. ESO.			IAM S. POL								
MIAMI FL 331	ll ave. 9th fl 131		MIAMI FL	XELL AVE. 33131	SIM PL			DO NOT WRIT	E IN THIS	SPACE		
								3. Date Incorporated or Qualified				
Principal P	Place of Business		2a. Mailing	Address	 -			11/05/1997 4. FEI Number		1 102	anti-el Cos	
	5W 68 C	T	26 12	600	SW 68	CT		65-080008	7		oplied For of Applicable	
Suite, Apt.				Apt. #, etc.						\$8.75		
22			27					5. Certificate of Status Desired		Fee Re	equired	
City & State	•	L	City &	State IAM i	FL 3	1156	•	Election Campaign Financing Trust Fund Contribution		\$5.00	May Be to Fees	
7in	7	Country	Zip		Cou	ntry		8. This corporation owes or has a				
24 <i>3</i> 315	6 25	DADE	29 33	156	30	DADE		Personal Property Tax due Jur		_ · -] No	
	g. Name and	Address of Current I	Registered A	gent				10. Name and Address of New F	legistered	Agent		
	TELLA, RONALD	A				81 Nar	ne					
	50 SW 8TH CT	2047				B2 Stre	et Addre	ss (P.O. Box Number is Not Accept	able)	· · · · · · · · · · · · · · · · · · ·		
10	ANTATION FL 33	3317				83		·				
						24 00				last su		
						84 City			FL	85 Zip i	Code	
11. Pursuant	to the provisions of	of Sections 607.0502 a	and 607.1508,	, Florida St	atutes, the a	ove-nam	ed corpo	pration submits this statement for the on's board of directors. I hereby acc	purpose o	f changing it	s registered	
agent. I a	am familiar with, an	id accept the obligation	ons of, Section	n 607.0505	, Florida Sla	ules.	o porane	mo board of amounts. Thoroby doo	opi alo app	000000000000000000000000000000000000000	rogistores	
SIGNATURE	Stanature, typed or print	ed mann of registered agon) a	and tille if applicable	lo .	(NOTE: Registere	Agent signs	iture repuired	d when reinstating)	DATE			
SIGNATURE	Signature, typed or print	ed name of registered agent a OFFICERS AND I			13.	I Agent signs		t when reinstating) ADDITIONS/CHANGES TO OFF		DIRECTOR	IS IN 12	
	D	OFFICERS AND I		DELETE	13.		P	ADDITIONS/CHANGES TO OFF		DIRECTOF	IS IN 12	
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that may expert a the arctimate and matthy signature shall have the same regardered as in made dide dair, that har a occurrer of frusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Itachman with an address.

SIGNATURE:

305 255-2600