	MENT	# P9800	0030682	R)	FILED Apr 29, 2001 08:00 AM Secretary of State						
Principal Place of Business			Mailing Address								
WEST PALM BEACH FL 33415			WEST PALM BEACH								
2. Principal Pi	lace of Busin	ness	3. Mailing Address								
Suite, Apt.	#, etc.	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State			City & State				4. FEI Number Applied For 65-0908770 Not Applicable				
Zip Country		Zip	Zip Coun			5. Certificate of Status Desired			litional	1	
	6. Name	and Address of Curren	t Registered Agent				7. Name and Address of New Register				1
LEWIS	ROBER	Т	,		Name						
1416 RANGI	E COURT				Street Ac	ddress (P.	O. Box Number is Not Acceptable)			 -	1
WEST PALM	M BEACH		FL				· · · · · · · · · · · · · · · · · · ·		-		
33415					City			FL Zi	o Code		1
8. The above	named entit	y submits_this statement f	or the purpose of changing it	s registere	ed office or	registered	d agent, or both, in the State of Florida.	·			1
9. This corpo	ration is elig	or printed name of registered agen pible to satisfy its Intangible and elects to do so.	1. 2. 2. a.c.	/!!! FEE 001 Fee	IS \$150.0 will be \$5	00 50.00	nen reinstating) 10. Election Campaign Financing Trust Final Contribution	- ,,	\$5.0	0 May Be to Fees	-
11.		OFFICERS AND		12.			ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS	3 IN 11	4
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D E SAMUEL MICHAEL LA ROSA TORO - SALDANA HUMANTANGA 198 URB. PAYET INDEPENDENCL LIMA, PERU S.A. L-028 OC							□ ci		Addition	CR2E034 (11/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete JUAN ROGGER LA ROSA TOTO - SALDANA S HUMANTANGA 198 URB. PAYET INDEPENDENCIA LIMA, PERU S.A. L-028 OC				JUAN ROGGER LA ROSA TORO - SALDANA HUMANTANGA 198 URB. PAYET INDEPENDE			_	CIA		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Delete ANA SALDANA - LA ROSA TORO HUMANTANGA 198 URB. PAYET INDEPENDENCIA LIMA, PERU S.A. L-028 OC				E Et address -St-zip			□ CI	nange	☐ Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					CI CI	nange	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete					□ CI	nangé	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	_		☐ Delete	CITY	E Et adoress -St-Zip			☐ CI		Addition	
of the corp	poration or t	n or supplemental report he receiver or trustee emp	is true and accurate and that	my signai t as requi	HITA CHAIL H	oua tha co	tion 119.07(3)(i), Florida Statutes. I furthe ame legal effect as if made under oath; ti Florida Statutes; and that my name appe		-4:	ar disastar	

04/29/2001

Date

Daytime Phone #

SIGNATURE: ROGGER LA ROSA TORO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR