


FILED
Feb 20, 2004 08:00 AM
Secretary of State

<div style="display: flex; justify-content: space-between;"><div>DOCUMENT # P98000031489 1. Entity Name BEN-VIVO ENTERPRISES, INC.</div><div style="text-align: center;"></div></div>		Secretary of State					
<div style="display: flex; justify-content: space-between;"><div>Principal Place of Business 2450 NE MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH, FL 33180</div><div>Mailing Address 2450 NE MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH, FL 33180</div></div>		<div style="text-align: center;"></div> <div style="display: flex; justify-content: space-between;">02182004No Chg-PCR2E034 (10/03)</div> <table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:80%;">4. FEI Number 65-0843521</td><td style="width:20%;">Applied For <input type="checkbox"/> Not Applicable</td></tr><tr><td colspan="2">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 65-0843521	Applied For <input type="checkbox"/> Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required							
DO NOT WRITE IN THIS SPACE							
6. Name and Address of Current Registered Agent SUPRASKI, LOUIS A ESQ 2450 NE MIAMI GARDENS DRIVE SECOND FLOOR NORTH MIAMI BEACH, FL 33180		DO NOT WRITE IN THIS SPACE					
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.							
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable</small></div><div>(NOTE: Registered Agent signature required when reinstating)</div><div>DATE _____</div></div>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS		<div style="text-align: right; font-size: 12px;">10/07/2004 12:37 02-182-04-80035 000 150.00</div> <div style="font-size: 24px; font-weight: bold;">DO NOT WRITE IN THIS SPACE</div>					
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12. 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 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: <i>Ophelia Roca</i>		<i>2/18/04</i>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #					