Principal Place of Business 190 Majorga Address 190 Majorga Majorg	DOCUI 1. Entity Nam DAVANN		į	FILED Jan 09, 2001 8:00 am Secretary of State 01-09-2001 90038 009 ***150.00						
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Do NOT WRITE IN THIS SPACE City & State City & State A. FEI Number 65-0840427 Applied For Not	1450 MADRUGA	A AVENUE #305	156 S. BAY HARBOR DR.							
City & State City & State of Rod Address of New Registered Agent 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. SIGNATURE Signature species purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its intangible Tax hing requirement and elects to do so. Mark Check Page will be \$550.00 Mark Check Page										
Signature and address of Current Registered Agent ASDOURIAN, ANNE M 1450 MADRUGA AVENUE #305 CORAL GABLES FL 33146 8. The above named ordity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE SCRIMATURE 9. This corporation is eligible to satisfy its Inflangable Tax filing requirement advelocities to do so. (See critaria or hosk) The Market Check Payable to Department of State ADDURIAN, ANNE M 1075 Tax filing requirement and elects to do so. (See critaria or hosk) ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1076 S.W. 2001 Fee will be \$550.00 Market Check Payable to Department of State ADDURIAN, ANNE M 1077 S.W. 2					4.	4. FEI Number 65-0840427 Applied For				
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ASDOURIAN, ANNE M 1450 MADRUGA AVENUE			gistered Agent	hioma	7. 1	Name and Address of New Re	egistered Ag	ent		1
CORAL GABLES FL 33146 6. 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. SIGNATURE Symane, typed or printed name of registered agent and titles it reportable. (NOTE Registered Agent signature registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its Intrangible FILE NOW!!! FEE IS \$150.00										
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. SIGNATURE Signature, typed or purised name of registered all supplicables (NOTE Registered Agent signature required when reintatura) DATE				City			<u>.</u>	Zin Code		1
SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS TO OFFI								Zip Gode	,	-
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13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	NAME STREET ADDRESS		☐ Delete	NAME STREET ADDRESS			Γ	_ Change	Addition	
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 reporter or trustee empowered 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	indicated of the con	on this report or supplemental report is tri poration or the repetiver or trustee empowe	ue and accurate and that m ered to execute this report a	w cianatura chall ha	ve the came	legal effect se it made under o	iath: that I am	an officer i	or director	
SIGNATURE: UNIO (15 Jauruan Duerta 1-4-01 (305)666-7366	SIGNAT	TURE: MINUTER AND THE PORT OF PER	LAUNAN OF SIGNING OFFICE	DUCK OR DIRECTOR	4	/-4-0/	(305)6	166-7	7366	