Principal Place of Business 2a. Mailing Address 4. 26 26 5. Suite, Apt: #, etc. 27 5. City & State 27 6. Zip Country 29 30 9. Name and Address of Current Registered Agent 10. AMERILAWYER 81 Name 343 ALMERIA AVENUE 82 Street Address (F CORAL GABLES FL 33134 83 84 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent, 1 am familiar, with, and accept the obligations of, section 607.0505, Florida Statutes. 84 City Sector GNATURE Mame FLODE OKS, B. ST Street Address SI Supnature, typed or printed name of registered agent and the it applicable. THODE Agent signeture required with	oard of directors. Thereby accept the appointment as registered	
1999 Division of corporations OCUMENT # P98000033780 WASHINGTON ENTERPRISES, INC. Mailing Address Mailing Address Signation Name Mailing Address Mailing Address Signation BLVD SMATURE Country Signation BLVD SATURE Country Signation Address of Current Registered Agent Inc. Address of Current Registered Agent Address of Countr	DO AFR 24 PH 12: 33 SECTEMENT OF STATE TATE AND OFFERENTIA DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 04/14/1998 FEI Number Applied For Not Applicable Certificate of Status Desired Certificate of Status Desired FEI Number Applied For Not Applicable Certificate of Status Desired Status Property No Name and Address of New Registered Agent Description Status Description Status Description Status Description Status Description Description Status Description Status Description	
Corporation Name FOR OUCCOUCTOC WASHINGTON ENTERPRISES, INC. aniput Place of Business Mailing Address S NORTH WASHINGTON BLVD 5945 NORTH WASHINGTON BLVD RASOTA FL 34243 SARASOTA FL 34243 Principal Place of Business 2a. Mailing Address Suite, Apt: #, etc. -Suite, Apt: #, etc. 26 Suite, Apt: #, etc. City & State 2a 21p Country 22s 22l 23 29 30 9. Name and Address of Current Registered Agent AMERILAWYER 81 343 ALMERIA AVENUE 82 CORAL GABLES FL 33134 84 City State 62 Street Address of Current Registered Agent 94 84 City Sector 83 84 City Sector 94 84 City Sector 84<	DO NOT WRITE IN THIS SPACE Dote Incorporated or Qualified 04/14/1998 FEI Number 04/14/1998 FEI Number 05 - 0972995 Not Applicable Certificate of Status Desired S8:75 Additional Fee Required Election Campaign Financing This corporation owes the current year Intargible Personal Property. Yes No Name and Address of New Registered Agent Description West the current year Intargible Personal Property. Yes No Name and Address of New Registered Agent Description Status Description STEPHELS O. Box Number is Not Acceptable) Stip Code Stip Code Stip Code Stip Code Stip Code Stip Code Stip Code <td c<="" th=""></td>	
AASHINGTON ENTERPRISES, INC. Injuit Chaos of Business Mailing Address 5 NORTH WASHINGTON BLVD 5945 NORTH WASHINGTON BLVD AARSOTA FL 34243 SARASOTA FL 34243 3. Trincipal Place of Business 2a. Mailing Address Aute, Apt: #, etc. - Suite; Apt: #, etc. 5. 27 - Suite; Apt: #, etc. 5. 28 - Suite; Apt: #, etc. 5. 29 30 9. 9. Name and Address of Current Registered Agent 10. AMERILAWYER 81 343 ALMERIA AVENUE 62 CORAL GABLES FL 33134 81 84 City Sector 607.0502 and 607.1508, Florida Statutes, the above-named corporations of agent, or both, in the State of Florida. Such change was authorized by the corporations b agent, and factore the obligations of, section 607.0505, Florida Statutes. NATURE Hand accept the obligations of, section 607.0505, Florida Statutes. MATURE Hand accept the obligations of, section 607.0505, Florida Statutes. NATURE Hand accept the obligations of, section 607.0505, Florida Statutes. NATURE Hand accept the obligations of, section 607.0505, Florida Statutes.	DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified Od/14/1998 FEI Number Applied For 65-0972995 Not Applicable Certificate of Status Desired \$8:75*Additional Fee Required \$8:75*Additional Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Yes Intangible Personal Property. Yes Name and Address of New Registered Agent Description STECHELS O. Box Number is Not Acceptable) STECHELS O. Box Number is Not Acceptable) Stip Code Submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered oard of directors. I hereby accept the appointment as registered	
5 NORTH WASHINGTON BLVD NASOTA FL 34243 S945 NORTH WASHINGTON BLVD SARASOTA FL 34243 3.	Date Incorporated or Qualified 04/14/1998 FEI Number Applied For 05 - 0972995 Not Applicable Certificate of Status Desired \$8:75 Additional Fee Required Fee Required Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Added to Fees This corporation owes the current year Yes Intangible Personal Property. Yes No Name and Address of New Registered Agent Description STEPHELS O. Box Number is Not Acceptable) Stip Code Stip Code 3u.2 4.3 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
SNORTH WASHINGTON BLVD ASOTA FL 34243 S945 NORTH WASHINGTON BLVD SARASOTA FL 34243 a. 3. trincipal Place of Business 2a. Mailing Address 26 26 uite, Apt: #, etc. Suite, Apt. #, etc. 27 Suite, Apt. #, etc. 25 29 30 9. Name and Address of Current Registered Agent 29 30 9. Name and Address of Current Registered Agent 10. AMERILAWYER 81 343 ALMERIA AVENUE 82 CORAL GABLES FL 33134 83 84 City Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporations of agent. I am familiar, with, and accept the obligations of section 607.0505, Florida Statutes. NATURE Street Acting Statutes. Supredure, typed or printed name of registered agent and the it applicable. INOTE: Registered Agent signeture required with	Date Incorporated or Qualified 04/14/1998 FEI Number Applied For 05 - 0972995 Not Applicable Certificate of Status Desired \$8:75 Additional Fee Required Fee Required Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Added to Fees This corporation owes the current year Yes Intangible Personal Property. Yes No Name and Address of New Registered Agent Description STEPHELS O. Box Number is Not Acceptable) Stip Code Stip Code 3u.2 4.3 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
rincipal Place of Business 2a. Mailing Address 4. 26 26 uite, Apt: #, etc. Suite, Apt: #, etc. 27 5. ity & State City & State 25 29 30 9. Name and Address of Current Registered Agent AMERILAWYER 81 343 ALMERIA AVENUE 82 CORAL GABLES FL 33134 83 84 City Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar, with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE HORE NCL, B. ST Signalure, hybed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required with the provision of printed name of registered agent	Date Incorporated or Qualified 04/14/1998 FEI Number Applied For 05 - 0972995 Not Applicable Certificate of Status Desired \$8:75 Additional Fee Required Fee Required Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Added to Fees This corporation owes the current year Yes Intangible Personal Property. Yes No Name and Address of New Registered Agent Description STEPHELS O. Box Number is Not Acceptable) Stip Code Stip Code 3u.2 4.3 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
rincipal Place of Business 2a. Mailing Address 4. 26 uite, Apt: #, etc. 27 ity & State 27 ity & State 27 ity & State 28 p Country 25 29 30 9. Name and Address of Current Registered Agent 10. AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar, with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE AMERILAMY BR Signeture, hybed or printed name of registered agent and the if applicable. Interpret of the dependent of the if applicable. Interpret of the dependent of the if applicable. Interpret of the dependent of the if applicable. Interpret of the provision of section does of the agent of the opplicable. Interpret of the dependent of the if applicable. Interpret of the opplicable. Interpret of the dependent of the if applicable. Interpret of the opplicable. Interpret of the opplicable. Interpret of the opplicable. Interpret of the dependent of the if applicable. Interpret of the opplicable. Interp	04/14/1998 FEI Number Applied For Not Applicable Set of Status Desired Certificate of Status Desired Set Required Set Required This corporation owes the current year Intangible Personal Property. Yes No Name and Address of New Registered Agent Description Operty. Operation Operation Operation No Name and Address of New Registered Agent Operation Operation Operation Operation Operation Operation Operation Operation Ope	
Integration of the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's brack of Florida. Such change was authorized by the corporation's bracket. 81 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's bracket. 83 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's bracket. 81 Nature 59 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation's bracket. 83 Street Address of Florida. Such change was authorized by the corporation's bracket. 81 NATURE FLORE NCE. B. ST Signature, typed or printed name of registered agent and tike if applicable. 100	65-0972995 Not Applicable Certificate of Status Desired \$8:75 Additional Fee Required Fee Required Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Yes Intangible Personal Property. Yes Name and Address of New Registered Agent 20250 STEPHELS O. Box Number is Not Acceptable) S. Number is Not Acceptable) S. Number is Not Acceptable) S. M. ASHILLG FOLD BLUO- PSOTD FL 85 Zip Code 3u,243 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
uite, Apt: #, etc.	Certificate of Status Desired \$8:75 Additional Fee Required Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees This corporation owes the current year Intangible Personal Property. Yes Name and Address of New Registered Agent DRE n (E STEPHELS O. Box Number is Not Acceptable) STEPHELS O. Box Number is Not Acceptable) Electode Statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
27 City & State 6. ip Country Zip Country 8. 25 29 30 9. Name and Address of Current Registered Agent 10. AMERILAWYER 343 ALMERIA AVENUE 81 Name FLCC CORAL GABLES FL 33134 83 83 84 City Street Address (F Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. Statutes. NATURE Attract and the provision of registered agent and the it applicable. FLODEE NCE_B_SI SI	Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees This corporation owes the current year Added to Fees Intangible Personal Property. Yes Name and Address of New Registered Agent Definition Stephtells P.O. Box Number is Not Acceptable) Stephtells P.O. Box Number is Not Acceptable Stephtells	
28 ip Country Zip Country 8. 25 29 30 30 9. 9. Name and Address of Current Registered Agent 10. 81 Name AMERILAWYER 81 Name FLCC 343 ALMERIA AVENUE 82 Street Address (F CORAL GABLES FL 33134 83 84 City Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE Image: Mathematical State of registered agent and the if applicable. FLODES NCS_B_SI	Trust Fund Contribution Added to Fees This corporation owes the current year Intangible Personal Property. Yes Name and Address of New Registered Agent OREACE B. STEPHELS O. Box Number is Not Acceptable) IS No PSOTD FL 85 Zip Code Bubmits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
ip Country Zip Country 8. 25 29 30 30 10. 9. Name and Address of Current Registered Agent 81 Name 10. AMERILAWYER 81 Name FLC 343 ALMERIA AVENUE 82 Street Address (F CORAL GABLES FL 33134 83 84 City Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE ALMERIA BACK AGENT AG	Intangible Personal Property. Yes No Name and Address of New Registered Agent POENCE B. STEPHELS PO. Box Number is Not Acceptable) S. W. ASHING TOW BLUD- POENCE	
9. Name and Address of Current Registered Agent 10. AMERILAWYER 81 Name 343 ALMERIA AVENUE 82 Street Address (F CORAL GABLES FL 33134 83 84 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE Address of registered agent end the it applicable.	Name and Address of New Registered Agent 2020 STEPHELS 20. Box Number is Not Acceptable) 35 N. WASHING TOD BLUD ASHING TOD BLUD BS Zip Code 34,243 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered 1,201	
AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE Signature, typed or printed name of registered agent and that if applicable. (NOTE: Registered Agent signature required with	0. Box Number is Not Acceptable) 15 N. WASHING TOD BLUD- PSOTD FL 85 Zip Code 3u,243 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
343 ALMERIA AVENUE CORAL GABLES FL 33134 82 Street Address (F 594 84 City Spg2 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent, I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE Fumue B State B Signalure, hybed or printed name of registered agent and tild if applicable. (NOTE: Registered Agent signature required with	0. Box Number is Not Acceptable) 15 N. WASHING TOD BLUD- PSOTD FL 85 Zip Code 3u,243 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
CORAL GABLES FL 33134 Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent, I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. NATURE HIMPLE State of registered agent and tild if applicable. (NOTE: Registered Agent signature required with the opticable. NOTE: Registered Agent signature required with the opticable. (NOTE: Registered Agent signature required with the opticable. NOTE: Registered Agent signature required with the opticable.	BSOTD FL 85 Zip Code 34243 Submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar, with, and accept the obligations of, section 607.0505, Florida Statutes. IATURE HOLL BACK BACK BACK BACK BACK BACK BACK BACK	BSOTD FL 34243 submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's b agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.	submits this statement for the purpose of changing its registered oard of directors. I hereby accept the appointment as registered	
agent, I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.	100/00	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required wh	EPHELS 1/20/00	
	en reinstating) ^{CDATE} ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
PD DELETE 1.1 TITLE	Change Addition	
HANSEN, NEIL	9000032489891 -05/11/0001099012	
TADDRESS 5945 NORTH WASHINGTON BLVD 1.3 STREET ADDRESS 5ARASOTA FL 34243 1.4 CITY-ST-ZIP	-03/11/0001033012 *****900.00 *****900.00	
STD DELETE 2.1 TITLE:	Change Addition	
STEPHENS, FLORENCE 22 NAME		
TADDRESS 5945 NORTH WASHINGTON BLVD 2.3 STREET ADDRESS 5ARASOTA FL 34243 2.4 CITY-ST-ZIP		
T-ZIP SARASUTA FL 34245 24 CITY ST-ZIP 24 CITY ST-Z	Change Addition	
3.2 NAME		
TADDRESS 3.3 STREET ADDRESS	TS BERNERAL SITS	
ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE	INSTATEMENT 99 01 15	
4.2 NAME		
4.3 STREET ADDRESS		
7-ZIP 44 CITY-ST-ZIP 44 CITY-ST-ZIP DELETE 5.1 TITLE	Change Addition	
52 NAME		
TADDRESS 5.3 STREET ADDRESS		
172P 54 GITY-ST-2P 54 GITY-ST-2P 61 TITLE		
	Change Addition	
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP Thereby certify that the information supplied with this filing does not qualify for the exemption stated in section 1		