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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS Secretary of State 02-24-1999 90050 003 ***150.00

FILED Feb 24, 1999 8:00 am

1999

DOCUMENT # **P98000062380**1. Corporation Name

NALDA FAMILY WELLNESS CENTER INC.

Principal Place	e of Business	Mailing Address	*		. 1001100110011011	Riff Williament Battl A		1911: 621) (88)
11300 N.W. 87T	тн ст	11300 N.W. 87TH CT					•	
#141		#141				107 MONTE IN T		
HIALEAG GARDENS FL 33016		HIALEAG GARDENS FL 33	HIALEAG GARDENS FL 33016			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or 07/15/1998	Qualified		[
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		. Ap	plied For
21	WARIY	26			(05-0850	81Z	 	t Applicable
Suite, Apt. #		Suite, Apt. #, etc.					\$8.75	Additional
22	•	27			5. Certifcate of Status D	esired	Fee Re	quired
City & State	e	City & State			6. Election Campaign Fi	inancing	\$5.00	May Be
23 HiAle	AH Gardens	28 Hialean 6	aarde	ins .	Trust Fund Contributi	ion	Added t	
Zip	Country	Zip	Соил	try	8. This corporation owe:	s the current year	r Intangible	
24	25	29	30		Personal Property Ta	x.	☐ Yes	□No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address	of New Register	red Agent	
			18	31 Name	Nalda, Antho	M		1
	DA, TONY		1	32 Street	Address (P.O. Box Number is No			
993 \	West 39th Street			~ QQ	· · · · · · · · · · · · · · · · · · ·			
HIAL	EAH FL 33012		Ĩ	33				J
			Ļ	A 016 1	· · ·		85 Zip (Code
			,	City L	lialean	F	FL ** ある	5012
							of chancing its	registered
11. Pursuant t	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	ites, the abo	ove-named	corporation submits this stateme	nt for the purpose	e of changing its	riotored
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State	e of Florida. Such change was a	authorized i	by the corp	corporation submits this stateme oration's board of directors. I here	nt for the purpose eby accept the ap	ppointment as re	gistered
office or re agent. I ar	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change was a	authorized i	by the corp	corporation submits this stateme oration's board of directors. I here	nt for the purpose eby accept the ap	opointment as re	gistered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State	e of Florida, Such change was a ations of, Section 607.0505, Flo	authorized I orida Statut	es.	corporation submits this stateme oration's board of directors. I here equired when reinstating)	nt for the purpose eby accept the ap	ppointment as re	gistered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	authorized I orida Statut	es.	equired when reinstating) ADDITIONS/CHANGE	OATE	S AND DIRECTO	RS IN 12
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag	e of Florida, Such change was ations of, Section 607.0505, Florent and title if applicable. (NOT	authorized I orida Statut E: Registered A	gent signature r	equired when reinstating) ADDITIONS/CHANGE ProsideNt	DATE S TO OFFICERS	opolitiment as re	yistered
office or reagent. I an SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	authorized orida Statut E: Registered A	gent signature r	equired when reinstating) ADDITIONS/CHANGE ProsideNt	DATE S TO OFFICERS	S AND DIRECTO	RS IN 12
office or reagent. I ar SIGNATURE 12.	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	euthorized orida Statut E: Registered A 13. 1.1 TITU 1.2 NAM	gent signature r	equired when reinstating) ADDITIONS/CHANGE President Notage, Anthon	DATE S TO OFFICERS	S AND DIRECTO	RS IN 12
office or reagent. I an SIGNATURE 12. TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A D NALDA, TONY 993 WEST 39TH ST	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STR	gent signature r	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was a pu Hialean, FL	DATE S TO OFFICERS	S AND DIRECTO	RS IN 12
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered ag OFFICERS A D NALDA, TONY	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STR	by the corpi es. gent signature r E E E E E E E E T T T T T	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was application, FL = Vice - President	OATE S TO OFFICERS	S AND DIRECTO	RS IN 12
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered agent OFFICERS AD NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012	e of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STRI	gent signature r E E E E E E E E E E E T T	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was application, FL Vice-President Nalda, Alejand	OATE S TO OFFICERS O 3012	S AND DIRECTO	RS IN 12
office or reagent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AD NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX	e of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM	gent signature r E E E E E E E E E E E T T	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and and an pu tial eah, FL Vice - President Nolda, Alejand 18255 SW 44 T	S TO OFFICERS NO 3012	S AND DIRECTO	RS IN 12
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AD NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE	e of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and 300 300 pc Hialean, FL Vice-President Nolda, Alejand 18255 SW 467 Miami FL 331	DATE S TO OFFICERS NO 3012 TO TEST 15	S AND DIRECTO	RS IN 12 Addition
office or reagent. I ar agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS AD NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX	e of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITL 2.2 NAM 2.3 STRI	gent signature r E E EET ADDRESS '-ST-ZIP E EET ADDRESS Y-ST-ZIP E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon ara w 3a pl Hialean, FL Vice-President Nolda, Alejand 18255 SW 467 Miami FL 331 Secretary / Treas	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	S AND DIRECTO	RS IN 12
office or reagent. I are agent. I are SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITU 1.2 NAM 1.3 STRI 1.4 CITY 2.1 TITU 2.2 NAM 2.3 STRI 2.4 CITY	gent signature r E E EET ADDRESS '-ST-ZIP E EET ADDRESS Y-ST-ZIP E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon ara was ap L Hialean, FL Vice-President Nolda, Alejand 18255 SW 467 Miami FL 331 Secretary / Treas Nolda, Martie	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	AND DIRECTO Change	RS IN 12 Addition
office or reagent. I are agent. I are seen agent	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM	gent signature r E E EET ADDRESS '-ST-ZIP E EET ADDRESS Y-ST-ZIP E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	AND DIRECTO Change	RS IN 12 Addition
office or reagent. I are agent. I are selected and a selected and	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI 3.3 STRI	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon ara was ap L Hialean, FL Vice-President Nolda, Alejand 18255 SW 467 Miami FL 331 Secretary / Treas Nolda, Martie	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	AND DIRECTO Change	RS IN 12 Addition
office or reagent. I are agent. I are selected and select	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI 3.3 STRI	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	AND DIRECTO Change	RS IN 12 Addition
office or reagent. I are agent. I are selected and select	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 2.1 TITL 2.2 NAM 2.3 STRI 2.4 CIT 3.1 TITL 3.2 NAM 3.3 STRI 3.4 CIT 3.4 CIT 3.4 CIT 3.4 STRI 3.4 CIT	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	S AND DIRECTO Change Change	RS IN 12 Addition Addition
office or reagent. I are agent. I are agent. I are street address city-st-zip title name name	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STR: 2.4 CITY 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR: 3.4 CITY 4.1 TITL 4.2 NAM	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	S AND DIRECTO Change Change	RS IN 12 Addition Addition
office or reagent. I are agent. I are signature. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STR: 2.4 CITY 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR: 4.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.3	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	S AND DIRECTO Change Change	RS IN 12 Addition Addition
office or reagent. I are agent. I are agent. I are street address city-st-zip title name name	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Fluent and title if applicable. (NOT ND DIRECTORS DELETE	E: Registered A 13. 1.1 TITL 12 NAM 1.3 STR: 2.4 CITY 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR: 4.4 CITY 4.1 TITL 4.2 NAM 4.3 STRI 4.3	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and Ban, FL Vice - President Nalda, Alejand 18255 SW Ale T Miami FL 331 Secretary / Treas Nalda, Martie and Ban Alejand	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	S AND DIRECTO Change Change	RS IN 12 Addition Addition
office or reagent. I are agent. I are agent. I are selected and a selected agent. I are agent. I	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Florida ations of the section o	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STRI 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STRI 4.1 TITL 4.2 NAM 4.3 STRI 4.4 CITY	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was pl tial ear, FL 3 Vice - President Nolda, Alejand Nolda, Alejand Nolda, Alejand Nolda, FL 331 Secretary / Treas Nolda, Martie and was pl Itialean FL 2	S TO OFFICERS O 3012 TO TOTO TOTO TOTO TOTO TOTO TOTO TOTO	AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
office or reagent. I are agent. I are selected and a selected and	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Florida ations of the section o	E: Registered A 13. 1.1 TITL 1.2 NAM 1.3 STR: 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR: 4.1 CITY 4.1 TITL 4.2 NAM 4.3 STR: 4.4 CITY 5.1 TITL 5.2 NAM	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was pl tial ear, FL 3 Vice - President Nolda, Alejand Nolda, Alejand Nolda, Alejand Nolda, FL 331 Secretary / Treas Nolda, Martie and was pl Itialean FL 2	DATE S TO OFFICERS NO 3012 TO TEST 15 SUPER	AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
office or reagent. I ar agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Florida ations of the section o	### August	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was pl tial ear, FL 3 Vice - President Nolda, Alejand Nolda, Alejand Nolda, Alejand Nolda, FL 331 Secretary / Treas Nolda, Martie and was pl Itialean FL 2	S TO OFFICERS O 3012 TO TOTO TOTO TOTO TOTO TOTO TOTO TOTO	AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
office or reagent. I ar agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Florida ations of the section o	### August	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was pl tial ear, FL 3 Vice - President Nolda, Alejand Nolda, Alejand Nolda, Alejand Nolda, FL 331 Secretary / Treas Nolda, Martie and was pl Itialean FL 2	S TO OFFICERS O 3012 TO TOTO TOTO TOTO TOTO TOTO TOTO TOTO	AND DIRECTO Change Change Change Change	RS IN 12 Addition Addition
office or reagent. I ar agent. I ar SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered age OFFICERS A D NALDA, TONY 993 WEST 39TH ST HIALEAH FL 33012 D NALDA, ALEX 13255 S.W. 46TH TERRACE MIAMI FL 33175 D NALDA, MARTY 993 WEST 39TH ST.	a of Florida. Such change was ations of, Section 607.0505, Florida ations of, Section	### August	gent signature r E E E E E E E E E E E E E	equired when reinstating) ADDITIONS/CHANGE President Nalda, Anthon and was pl tial ear, FL 3 Vice - President Nolda, Alejand Nolda, Alejand Nolda, Alejand Nolda, FL 331 Secretary / Treas Nolda, Martie and was pl Itialean FL 2	S TO OFFICERS O 3012 TO TOTO TOTO TOTO TOTO TOTO TOTO TOTO	AND DIRECTO Change Change Change	RS IN 12 Addition Addition Addition Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE;