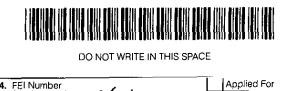
2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # POOCOOOO

FILED Jan 31, 2000 8:00 am Secretary of State

01-31-2000 90024 048 ***150.00

MASTER RECOVERY CORP.						
Principal Place of Business	Mailing Address					
3000 NW 5TH TERR. #111 POMPANO BEACH FL 33064	3000 NW 5TH TERR. #111 POMPANO BEACH FL 33064-3151					
2. Principal Place of Business 3087 N.W 123 AV.	3. Mailing Address 3087 N.W 123 A.V					
Suite, Apt. #, etc.	Suite, Apt. #, etc.					
City & State	City & State					



Not -; ··· \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent VILLANUEVA, VICTOR

changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

3000 NW 5TH TERR. #111

POMPANO BEACH FL 33064

VILLANUEUA Street Address (P.O. Box Number is Not Acceptable)

7. Name and Address of New Registered Agent

USA

3087 N.W 123

DATE

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.

33323

Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2000 Make Check Payable		Fee will be \$5				\$5.00 May Be Added to Fees				
11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VILLANUEVA, VICTOR 3000 NW 5TH TERR. #111 POMPANO BEACH FL 33064	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3087 SUNR	N.W ISE	123 FL	AU. 33323.	Change .	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	£ .	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
13. 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 11 or Block 12 if										