FILED Jan 19, 2000 8:00 am Secretary of State

01-19-2000 90276 008 ***150.00

DOCUMENT # P99000010411

1. Entity Name

HAVANA NORTH, CORPORATION, INC.

Principal Place of Business

Mailing Address

100 SE 2ND ST., SUITE 2350 MIAMI FL 33131

100 SE 2ND ST.. SUITE 2350 MIAMI FL 33131-2151



Suite, Apr. #, atc.	Suite, Apr. #, etc.		BO NOT WHITE IN THIS STACE	
MIAMI BEACH, FL	City & State	+ FL 4. FEI Numb	4. FEI Number / F A 90 /	Applied For
	IMIAMI BEAC		4. FEI Number 65-089 6	Not Applicable
-3314\\(\)5A	Zip 33141 Cou	u SA_	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent		
KAUFFMAN, RONALD	· · · · · · · · · · · · · · · · · · ·	Name FUE	RTES, RONALD P.O. Box Number is Not Acceptable)	
100 SE 2ND ST., SUITE 2350				
MIAMI FL 33131	550 S. SHORE DRIVE			
		CityMIAN	11 BEACH	FL 210 509 141
8. The above hamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				

9. This corporation is eligible to atisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

tered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. TITLE Change Addition ☐ Delete TITLE FUERTES, RONALD NAME 550 S. SHORE DRIVE STREET ADDRESS STREET ADDRESS 100 SE 2ND ST., SUITE 2350 CITY-ST-ZIP CITY-ST-7IP MIAMI FL 33131 ☐ Addition D Change ☐ Delete TITLE TITLE ZAIAS, RAQUEL NAME NAME -100 SE 2ND ST., SUITE 2350 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33131 - Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET, ADDRESS CITY-ST-ZIP

is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information be and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director ered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 is I hereby certify that the infort ation supplied with this indicated on this report or supplemental report is tree. of the corporation or the rec changed, or on an attachme

SIGNATURE: