P99000018134

Principal Place of Business

LAUDERHILL FL 33319

7558 W. COMMERICAL BLVD

Mailing Address

7558 W. COMMERICAL BLVD LAUDERHILL FL 33319

2. Principal Pla	ce of Business 5 WAY	3. Mailing Address 6420 NW 5 WAY						
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
FT. LAUD	ERDALE, FLORIDA	City & State FT_ LAUDERD	ALE FLOR	ZIDA 4	. FEI Number 65-0899675		Applied For Not Applicable	
3330	09 Country USA	Zip 3 3309	Country US	A 5.	. Certificate of Status Desired	□ \$8.75 Fee Requ	Additional uired	
6. Name and Address of Current Registered Agent								
	•		Name	SEVE	ZKINO RODRI	GUES		
MISCH, ER			Street A	Street Address to Box Number is Not Ageeptable WAY				
	ommercial blvd.			64ac	, , , , , , , , , , , , , , , , , , ,			
LAUDERHIL	LL FL 33319				,			
	1		City /	T. LA	UDERDALE	FL Zip S	3309	
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.								
SEVERINO RODRIGUES PRES								
SIGNATURE Signature, typed or printed name of registered agent and tiple if (pplicable). (NOTE: Registered Agent signature required when reinstaffing) DATE								
9. This corpora	ation is eligible to satisfy its Intangible quirement and elects to do so.	After May 1 20	!! FEE IS \$150. 02 Fee will be \$5		10. Election Campaign Fin		5.00 May Be	
(See criteria	·	Make Check Payat			Trust Fund Contribution	n. LJ Add	ded to Fees	
11.	OFFICERS AND	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	ORS IN 11	
TITLE	PSTD	☐ Delete	TITLE	PRES	SIDENT, STD	∑ Chang	ge Addition	
			NAME STREET ADDRESS	ERIC	MISCH			
	SS 7558 W. COMMERCIAL BLVD LAUDERHILL FL 33319				6420 NW 5 WAY TELAUDERDALE, FL 33309			
	VICE PRESIDENT	Delete	CITY-ST-ZIP TITLE	1110E	PRESIDENT	Chang	ge Addition	
NAME	SEVERINO RODRIGO	VES Dillete	NAME	SEVE	RIND RODRIGUE	5	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	6420 NW 5 WAY			16420 NW 5 WAY				
CITY-ST-ZIP	FT. LAUDERDALE, FL 33309			FT L	AUDERPACE, FL	33309		
TITLE		☐ Delete	TITLE	~~~	Carlo and Carlo Management of the St	☐ Chang	je 🔲 Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				ĺ	
CITY-ST-ZIP			CITY-ST-ZIP	:				
TITLE		☐ Delete	TITLE			Chang	ge Addition	
NAME			NAME			_ `	_	
STREET ADDRESS			STREET ADDRESS				1	
CITY-ST-ZIP			CITY-ST-ZIP		···			
TITLE		☐ Delete	TITLE NAME			☐ Chang	ge	
NAME STREET ADDRESS			STREET ADDRESS				1	
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Chang	ge 🔲 Addition	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	L	- 440 07(0)(2) El. 14- 01 : : : :			

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 acquirate 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 of 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.

SIGNATURE: