S.R. GROUP, INC.			Jan 10, 2001 8:00 am Secretary of State	
Principal Place of Business	Mailing Address		01-10-2001 900	086 019 ***150.00
	725 N. ATLANTIC BLVD., A FT. LAUDERDALE FL 33304			
2. Principal Place of Business 735 Ft. LAUDERBALL Bell. BLV. Suite, Apt. #, etc.	3. Mailing Address 3. Ft. LAU W Suite, Apt. #, etc.	RUALE BACK,	SLV. DO NOT WRITE IN TH	IS SPACE
City & State FT LAUDERTALE FL	City & State FT. LAVDER	DALR FL	4. FEI Number 65-0907779	Applied For Not Applicable
Zip Country 3 3304 US A	Zip 33304	Country USA	Certificate of Status Desired Name and Address of New Register	\$8.75 Additional Fee Required
6. Name and Address of Current Re	gistered Agent	Name	EAN - RICHARD	
RICHARD, JEAN 725 N. ATLANTIC BLVD., A1A FT. LAUDERDALE FL 33304		Street Address	S (P.O. Box Number is Not Acceptable)	ACH BLV.
		City Fut	F/1-54/ 5/12-C	L Zip Code 333304
8. The above named entity submits this statement for the SIGNATURE Signature, typed or printed name of registered agent and	DieseTos	0-	en Lefal	14/01
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 20	!!! FEE IS \$150.00 io1 Fee will be \$550.00 ble to Department of Si		\$5.00 May Be Added to Fees
11. OFFICERS AND DI	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE D NAME STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33304	☐ Delete	TITLE NAME STREET AODRESS CITY-ST-ZIP	25 Ft. LAUDER DALH	□ Change □ Addition : BeH·SLV.
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	☐ Delete	CITY-ST-ZIP TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS City-St-zip		STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP 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 the indicated on this report or supplemental report is true of the corporation or the receiver or trustee empower changed, or on an attachment with an address, with SIGNATURE:	ue and accurate and that r ered to execute this report	r the exemption stated in my signature shall have th as required by Chapter 6	e same legal effect as if made under oath; tha	it I am an officer or director