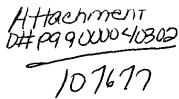
FILED 2000 UNIFORM BUSINESS REPORT (UBR) Aug 21, 2000 8:00 am Secretary of State DOCUMENT # P99000040302 1. Entity Name CENTURY ONE INC. REALTORS 07-13-2000 90011 025 \*\*\*150.00 Principal Place of Business Mailing Address 82 EAST 45TH STREET 82 EAST 45TH STREET HIALEAH FL 33012 HIALEAH FL 33012 3. Mailing Address 2. Principal Place of Business 900 West 495+ #420 # 420. 900 West 49 st Suite, Apt. #, etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE Suite # 420 Suite # City & State City & State 4. FEI Number Applied For HIALEAH TORINA FloxIdA Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 3301Z U 5A Fee Required --- - G.-Name and Address of Current Registered Agent-7.-Name and Address of New Registered Agent -LLORCA, GUIDO LLORCA, GUIFDO Street Address (P.O. Box Number is Not Acceptable) 6620 WEST 2ND COURT #113 HIALEAH FL 33012 8. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. LLORCA. 150.4 FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filling requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 3JTIT ☐ Delete TILE LLORCA Guido Lichange 400 West 495+ Suite # 420 LLORCA, GUIDO NAME NAME 6620 WEST 2ND CT #113 STREET ADORESS STREET ADDRESS HIRICAH Fl. 33012 CITY-ST-ZIP CITY-ST-778 HIALEAH FL 33012 ☐ Addition TITLE ☐ Delete tine ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2P CITY-SY-ZIP Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete DITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-57-ZIP 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 path; 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 changed, or on an attachment with an address, with all other like approved. SIGNATURE:





## CENTURY ONE INC. REALTORS 900 WEST 49 ST. Suite # 420 Hialeah Florida 33012 305-823-6090

Florida Department of State.

Division of Corporation

P.O.Box 6327 Tallahassee, Florida 32314

To Whom It May Concern:

Several weeks ago, when I send the check in the amount of \$ 150.00 I have spoken with Your office and this was the amount that I was told to send after my explication.

I had never received the first renewal form, This was send to my mother home, she is blind and it was lost.

The second notice I personally took from the mailbox, all call your office.

I just had two open hart operations in May, I am working very hard to keep this office Open due to the expenses and fees. I hope that your office Wave the extra fee of 400.00

Sincerely.

Guido Llorca