| UPCUMENT # P995000036472 04-29-2008 90075 041 *** UPARWAYS, INC. 04-29-2008 90075 041 *** Principal Place d Business 6330 PORTILLO MAM, FL 33146 6330 PORTILLO DO NOT WRITE IN THIS SPACE 01092008 No Chap P CR2E034 (1) FCX, JONATHAN 6300 PORTILLO MIAM, FL 33146 01092008 No Chap P CR2E034 (1) FCX, JONATHAN 6300 PORTILLO MIAM, FL 33146 DO NOT WRITE IN THIS SPACE FCX, JONATHAN 6300 PORTILLO MIAM, FL 33146 DO NOT WRITE IN THIS SPACE Status and Address of Current Registered Agent FCX, JONATHAN FCX, JONATHAN 6300 PORTILLO MIAM, FL 33146 DO NOT WRITE IN THIS SPACE Status and Address of Current Registered Agent FCX, JONATHAN FCX, JONATHAN 55.00 Not the busine of Fords. Law tamile the oblighter of the purpose of charge place d agent, or both. In the State of Fords. Law tamile the oblighter of the purpose of the page sector d agent d agent. State address COPICEPS AND DIRECTORS DO NOT WRITE IN THIS SPACE Material address COPICEPS AND DIRECTORS DO NOT WRITE IN THIS SPACE Material address C | 2008 FOR PROFIT CORPORATION ANNUAL REPORT | | | | FILED Apr 29, 2008 8:00 am Secretary of State | | |
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| 6330 PORTILO MAM, FL 33146 6330 PORTILO MAM, FL 33146 DO NOT WRITE IN THIS SPACE USE Of the second seco | 1. Entity Name | | 58472 | | | 04-29-2008 90075 041 ***150.00 | |
| DO NOT WRITE IN THIS SPACE 0.002/08 No Chg-P CR2E034 (11 4 FE Number 65-09408336 Contribution FOX, JONATHAN 830 PORTILLO MIAMI, FL 33146 DO NOT WRITE IN the above named oritly submitte this statement for the purpose of charging its registered office or registered agent, or both, in the State of Fords. I am familie the abiguines of registered agent. SIGNATURE The above named oritly submitte this statement for the purpose of charging its registered office or registered agent, or both, in the State of Fords. I am familie the abiguines of registered agent. SIGNATURE The above named oritly submitte this statement for the purpose of charging its registered office or registered agent, or both, in the State of Fords. I am familie the abiguines of registered agent. SIGNATURE The above named oritly submitte this statement for the purpose of the agence the abiguines of registered agent. OFFICERS AND DIRECTORS That Fund Contribution. Stop OFTILLO MIAMI, FL 33146 The Fund Contribution. Stop ON THILO MIAMI, FL 33146 The Fund Contribution. Stop ON THILO MIAMI, FL 33146 The Fund Contribution. Stop ON THILO MIAMI, FL 33146 The Fund Contribution. The Fund Cont | 6930 PORTILL | .0 | 6930 PORTILLO | | | , , , , , , , , , , , , , , , , , , , | |
| FOX, JONATHAN B930 PORTILLO MIAMI, FL 33146; The above named onty submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familie the obligation of registered agent or brightered agent or the state of Florida. I am familie SIGNATURE SIGNATURE SIGNATURE SIGNATURE DURING THE STATEMENT OF THE PURPOSE OF THE PURPOSE OFFICE POSITIVE THE STATEMENT OF THE PURPOSE OFFICE POSITIVE THE STATEMENT OF THE PURPOSE OFFICE POSITIVE THE PURPOSE OFFICE POSITIVE THE PURPOSE OFFICE POSITIVE OFFICE OFFICE OFFICE OFFICE OFFI | D | | | ACE | 01092008 4. FEI Number 65-0940 | No Chg-P CR2E034 (11/05) Applied For 0836 Not Applicable | |
| the obligations of registered agent. SIGNATURE Signaure, typed or privide name of inglatered agers and the 1 appKable (NOTE Registered Agent Agent agentaria) DATE FILE NOWINI :FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 • Election Campaign Financing S\$5.00 May Be Added to Fees • • • • • • • • • • • • • • • • • | 6930 PORT MIAMI, FL | THAN ILLQ 33146 | | stered office or registe | IN T | HIS SPACE | |
| TITLE DPST: NAME FOX, JONATHAN 6930 PORTILLO 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P TITLE NAME STREET ADDRESS 007*-51-2P | SIGNATURES File | NOW!!!: FEE IS \$150.00 y 1, 2008 Fee will be \$55 | 9. Election Campaign F 0.00 Trust Fund Contribut | inancing _ \$5 | 5.00 May Be | DATE | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | DPST: FOX, JONATHAN 8930 PORTILLO | ND DIRECTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that 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 of the corporation or the receiver or trustee empowered to execute this report as reduited by Chapter 607, Florida Statutes; and that my mane appears in Block | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that 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 of the corporation or the receiver or trustee empowered to execute this report at report at report effect. Florida Statutes: and that my new provide the corporation or the receiver or trustee empowered to execute this report at report at report effect. | TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | | | | | | |
| changed, or on an attachment with an address, with all other like empowered. | 12. I hereby ce indicated o of the corp changed, o | r on an attachment with an addres | with this filing does not qualify for the rt is true and accurate and that my si npowered to execute this report as re s, with all other like empowered. | e exemptions containe opture shall have the optimed by Chapter 60 | | Florida Statutes. I further certify that the information as if made under oath; that I am an officer or director ; and that my name appears in Block 10 or Block 11 if 305 | |

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