BULDUCHTK HULDINGS, INC.       0-4-03-2001 90047 031 ***150.00         Nindpail Place of Business       Nating Address         Principal Place of Business       9. Mailing Address         Sulls, Apit #, etc.       Sale, Apit #, etc.         City & Sales       Cry & Sale         Zip       Country         Sulls, Apit #, etc.       Sale, Apit #, etc.         City & Sales       Cry & Sale         Zip       Country         Selection Apit # etc.       Sale, Apit #, etc.         City & Sales       Cry & Sale         Zip       Country         Selection Apit # etc.       Sale, Apit #, etc.         Selection Apit # etc.       Sale, Apit #, etc.         City & Sales       Cry & Sales         Zip       Country         Selection A sale       T. Name and Address of Current Registered Agent         Not applicate Apit # etc.       Sale, Apit #, etc.         City & Sales       Sale, Apit #, etc.         City & Sales       Sale Address of New Registered Agent         Not applicate Apit # etc.       Sale Address of New Registered Agent         Not applicate Apit # Apit # etc.       Sale Address of New Registered Agent         Sale Address of New Registered Agent       Nearce Address of New Regitsered Agent	1. Entity Name	0061629	ORȚ (UBR)	FILED Apr 03, 2001 8:00 am Secretary of State
No AGREART THE NOTE ALL AND AND AND FRANK FL 33333  POST OFFICE BOX 800 FORT LAUGEROLE FL 33334  DO NOT WRITE IN THIS SPACE  DO NOT WRITE IN THIS SPACE  DO NOT WRITE IN THIS SPACE  Covering C	Bulldog-HK Holdings, Inc.	· .		
ALLAND PARK FL 3334 FORT LAUDERDALE FL 3333 DO NOT WRITE IN THIS SPACE Frincipal Place of Business Suite. Apt. 4, etc. Suite. Apt. 4, etc. City & State City & City	Principal Place of Business	Mailing Address		_
Suite, Apt. #, etc.         Suite. Apt. #, etc.         Suite. Apt. #, etc.         Do NOT WITE: IN THIS SPACE           City & State         City & State         4. FE: Number         65-0036491         Applied Fo           Zip         Country         20         Country         6. Certificate of Status Devind         78.75 Additional           Selfect A. UTRERA, P.A.         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE           COPAL GABLES FL. 33134         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE         Sold AllefAnd AVENUE           COPAL GABLES FL. 33134         Sold AllefAnd AVENUE         S	310 NORTHEAST 17TH AVENUE AKLAND PARK FL 33334		13303	
City & Stato  C	2. Principal Place of Business	3. Mailing Address		
Cry Build       Or B build       Or B build       Inter Apprendix         Zp       Country       Zp       Country       Status Desired       Status	Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
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SPECEL & JITREPA, P.A.     Name       33 ALMERIA AVENUE CORAL GABLES FL 33134     Siries: Xd0ress (P.O.:Box Number if No1 Acceptable)       City     FL     Zip. Code       A. The above named ently submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Forida.       SIGNATURE     Bighus bade or provide and deptand agent and the aceduate agents in back     ONTE Represent Administration of adpland to state of Forida.       SIGNATURE     Bighus bade or provide and deptand agent and the aceduate agents in back     ONTE Represent Administration of adpland to state of Forida.       SIGNATURE     Bighus bade or provide addeptine at the aceduate agents in back     ONTE Represent Agent spatial managent administration of adpland to ace and adde to free will be \$550.00 Make Check Payable to Department of State and the Check Payable to Department of State and the State of FFICERS AND DIRECTORS     10. Exection Campaign Financing Trust Find Control building adde to frees and the State of FFICERS AND DIRECTORS     12. AdDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 It is make frees and the state of FICER State DIRECTORS     12. AdDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 It is make frees and the state of the state of the state of the state of the state added to frees and the state of th	Zip Country	Zip	Country	
Add AUMERIA AVENUE     CORAL GABLES FL 33134      Orly     FL     Zp Code     City     FL     City     FL     Zp Code     City     FL     City     FL     City     FL     City     FL     City     Ci	6. Name and Address of Curre	ent Registered Agent	Name	7. Name and Address of New Registered Agent
CORAL GABLES FL 33134  City  FL  Zp Coce  City  FL  City FL	•		Street Addre	ss (P.O. Box Number is Not Acceptable)
A. 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.      SiGNATUPE      Suppose, types or printed state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port Example of particle state of registered agent and the if ageloace.      Port LaUDERDALE FL 33308      The MARE      Port State      Port LAUDERDALE FL 33308      Port State      Port LAUDERDALE FL 33308      Port State      Port S			City	Zip Code
IGMATURE       Date       Date         Is corporation is eligible to satisfy its intangible (as ting requirement and elects to do so.)       If LE MOVIL! FEE IS \$150.00 Atter MAY 1, 2001 Fee will be \$550.00 Mater MAY 1, 2001 Fee will be \$550.00 Mater Check Payable to Department of State       10. Election Campaign Financing Trust Fund Contribution.       \$55.00 May Be Added to Fees         1.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         1.       Delete       TTLE       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         1.       Delete       TTLE       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         1.       Delete       TTLE       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11         1.       IEDBETTER, DEAN I       STREIT ADRESS       Change       Addition         1.       Delete       TTLE       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change       Addition         1.       DELEDBETTER, DEAN I       STREIT ADRESS       Change       Addition         1.       DELEDBETTER, DEAN I       STREIT ADRESS       Change       Addition         1.       Delete       TTLE       Change       Addition       Change       Addition         1.       Delete       TTLE       Delete       TTLE       Change       Addition </th <th></th> <th>the the purpose of chooging i</th> <th>its registered office of regi</th> <th>stered agent or both in the State of Florida</th>		the the purpose of chooging i	its registered office of regi	stered agent or both in the State of Florida
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Intel       NAME         IMME       STREET ADDRESS         CITY-ST-ZIP       CITY-ST-ZIP         IS. 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 oath; 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 empowered.	TITLE D NAME LEDBETTER, DEAN I STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE FL 33300 TITLE NAME STREET ADDRESS	ND DIRECTORS  Delete  Delete  Delete  Delete	12. TIFLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	State     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change     Addition       Change     Addition
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