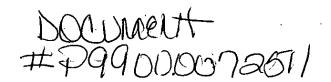
 Entity Name 	MENT # PS	990000	72511	<u>.</u>	May 29, 2001 Secretary of	State
Principal Place 88 W. HALLAND ALLANDALE FL	DALE BEACH		Mailing Address 838 W. HALLANDALE BEA HALLANDALE FL 33009	АСН	04-28-2001 90040 007 *	**150.00
2. Principal Pla 2905 Suite, Apt. 4	ADAMS ST		3. Mailing Address 2905 ADA Suite, Apl. #, etc.	nms St	DO NOT WRITE IN THIS SPACE	
	LYWOOD, FL		City & State HOLLY WOO		06520952490 Not A	ed For applicable
33014	6. Name and Add	SA	33019	USA	Certificate of Status Desired	onal
444 E Suite	ENNIA CONSULTIN BRICKELL AVE.			Street Add	ANGEL FERMANDES ess (P.O. Box Number is Not Acceptable) OS ADAMS ST HOLLYYOOD, FL Zip Code 330	19
SIGNATURE _	named entity submits			its registered office of re	pistered agent, or both, in the State of Flotida. 04125/2001	
9. This corpor Tax filling re	ration is eligible to sat equirement and elect ia on back)	isty its Inlangible	FILE NOV	W!!! FEE IS \$150.00 2001 Fee will be \$550 able to Department o	.00 Trust Fund Contribution. Added to	Fees
TITLE NAME STREET ADDRESS CITY-ST-24P	PD DOS SANTOS, JO 3245 NE 184TH S AVENTURA FL 33	T. ≢1 3104	RECTORS Delate	12. INLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II DISSANTES, JOSE R 2905 ADAMS STREET HOLLYWOOD, FL 33019	CB2E034 (10/00)
itle IAME Itreet adoress Ity-st-zip	AVENTO SA TE SA	100	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	Charge	Addition
TLE AME TREET ADDRESS ITY-ST-ZIP			☐ Delete	NAME STREET ADDRESS DITY-ST-ZP	☐ Change	Addition
TLE AME TREET ADDRESS ITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TLE AME TREET ADDRESS ITY+ST-ZIP			☐ Delete	TITLE HAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
itle Ame Treet adoress BTY-\$T-ZIP			☐ Deleta	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change	Addition
indicated of the cor	on this report or supple poration or the receive or on an attachment	piemental report is er or trustee empo with an address, v		at my signature shall haviort as required by Chapi ed	in Section 119.07(3)(i). Florida Statutes. Hurther certify that the info e the same legal effect as if made under oath; that I am an officer of er 607, Florida Statutes; and that my name appears in Block 11 or B	



Please use the label IRS provided when filing tax documents and FTD coupons when making FTD payments. If that isn't possible, you should use your EIN and complete name and address as shown below to identify your account and to avoid delays in processing.

HRS BUSINESS CORPORATION 444 BRICKELL AVE STE 750 MIAMI FL 33131

If this information isn't correct, please correct it using the bottom part of this notice. Return it to us at the address shown so we can correct your account.

Thank you for your cooperation.

Keep this part for your records.

CP 575 A (Rev. 1-1999)

Return this part with any correspondence so we may identify your account. Please correct any errors in your name or address.

CP 575 A

0716927265

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-15-1999

EMPLOYER IDENTIFICATION NUMBER: 65-0952490 FORM: SS-4

INTERNAL REVENUE SERVICE ATLANTA GA 39901

HRS BUSINESS CORPORATION 444 BRICKELL AVE STE 750 MIAMI FL 33131