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Suite Apil # otc Suite Apil # otc Suite Apil #	. Principa	I Place of Business	2a. Mailing Address		11/08/90	· '
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County 20 28 33134 30 US 6. This corporation has habitaly for managine law under a 199 032	<u></u>	tate		les. FL		\$5.00 May Be
9. Name and Address of Current Repistered Agent Mr. Joseph Weisenfeld Suite 900 92 Street Address (P.O. Box Number is Not Acceptable) 93 Street Address (P.O. Box Number is Not Acceptable) 94 City 95 Prickell Avenue Miami, FL 33131 84 City FL 95 Zip Code Pursuant to the provision of Sections, 617,662 and 617,668 Forms Statute and Conference agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent agent and and accept the obligations of Section 617,6603 Forms Such change was attained agent	Ζιρ]	├ \	Zıp	Country	8. This corporation has liability for	intangible tax under s. 199.032
Mr. Joseph Weisenfeld Suite 900 799 Brickell Avenue Miami, FL 33131 Pyrsuant to the processors of Sections 617 0002 and 617 5688 Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered orgen or being mine statement for the purpose of changing its registered orgen or annual corporation submits this statement for the purpose of changing its registered orgen or being mine statement for the purpose of changing its registered orgen or statement and accept the obligations of Section 617 0002 Florida Statutes in the above named corporation's board of directors. I thereby accept the appointment as registered orgen or statement dropment as registered orgen or statement dropment as registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or statement for the purpose of changing its registered orgen or		9. Name and Address of Curre	ent Registered Agent			
Miami, FL 33131	Sui	te 900		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
Pursuant to the provisions of Sections 617 0502 and 617 1508 Fiorida Statules. The above named corporation submits this statement for the provisions of Sections 617 0502 and 617 1508 Fiorida Statules. The above named corporation submits this statement for the propose of changing its registered agent 1 and familiar with and accept the obligations of Sections 617 0503, Fiorida Statules. The above named corporations about of directors. Thereby accept the appointment as registered agent 1 and familiar with and accept the obligations of Sections 617 0503, Fiorida Statules. The above named corporations about of directors. Thereby accept the appointment as registered agent 2 and 1 a						
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PD	agent 1	am familiar with and accept the obliq	gations of, Section 617,0503, F	utes the above-named cor authorized by the corpora forida Statutes	anon's board of directors. Thereby accep	
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do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I made under oath; that I am an officer or director of the corporation or the recover at a state of the corporation or the recover at a state of the corporation or the recover at a state of the corporation or the recover at a state of the corporation or the recover at a state of the corporation or the recover at a state of the corporation or the recover at a state of the corporation of the corporation or the recover at a state of the corporation of the corpo	E E E E E E E E E E E E E E E E E E E	PD Rodolfo Stern 550 Biltmore Way Coral Gables, FL VSD Roberto Horwitz 550 Biltmore Way Coral Gables, FL VSD Roberto Horwitz 550 Biltmore Way Coral Gables, FL VTD David Serviansky 550 Biltmore Way Coral Gables, FL VTD David Serviansky 550 Biltmore Way Coral Gables, FL VTD David Serviansky 550 Biltmore Way Coral Gables, FL VD Eduardo Stern 550 Biltmore Way	gations of Section 617.0503, F gent and life if applicable (NO ND DIRECTORS DELETE , Suite 1110 33134 DELETE , Suite 1110 33134 DELETE , Suite 1110 33134 DELETE	authorized by the corpora authorized by the corpora iorida Statutes TE Registered Agent eignature requ 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZP 21 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 4 2 NAME 4 3 STREET ADDRESS 5 1 TITLE 5 NAME 5 3 STREET ADDRESS 5 1 TITLE 5 NAME 5 3 STREET ADDRESS 5 NAME 5 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFIC ADDITIONS/CHANGES TO OFFIC 4000185 -06/10/960102	DATE ERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
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