2001 UNIFORM BUSINESS REPORT (UBR)

	MENT# s63634	, *		April 17, 2001 6.0		
1. Entity Nam	e TIETH CENTURY LOC	WO Y INC		Secretary of Sta		
TWEN	TIETH CENTURY LOG	ss, inc.	✓	04-17-2001 90166 002 ***150	.00	
Principal Place of Business Mailing Address						
841 Lincoln Road 200 S. Biscayn			Blvd.			
Miami Beach, FL 33139 20th Floor						
	,	Miami, FL 331	31	A0051299	•	
-				Allusta		
2. Principal Place of Business		3. Mailing Address 201 S. Biscayne Blvd				
Suite, Apt. #, etc.		Suite 850		DO NOT WRITE IN THIS SPACE A FEI Number ADD 60 FC		
City & State		City & State Miami, FL		60004046	Applicat e	
Zip	Country		untry	5. Certificate of Status Desired		
	6. Name and Address of Current F		·	7. Name and Address of New Registered Agent		
TO BE AN TO PRODUCE TO THE OWNER OF THE PROPERTY OF THE PROPER				ddress change only)		
ROSSZ FIU CORPORATION 200 South Biscayne Boulevard				Street Address (P.O. Box Number is Not Acceptable) 201 South: Biscayne Boulevard		
20th Floor to the position of the control of the co			201 Sou	Suite 850		
Miami, FL 33131			.;			
* 4		The second secon	City Miami	FL Zig Coof	1	
8. The above	named entity submits this statement for	the purpose of changing its regist		stered agent, or both, in the State of Florida.		
	ROSSE FIU Corpora	fion	Care	1 Pres 4/6/01		
SIGNATURE.	Signature, typed or printed name of registered agent a	not that it applicable. (NOTE: Regist	tered Agent signature requ		<u> </u>	
	1.185	· · · · · · · · · · · · · · · · · · ·				
	oration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1-2001 F	e will be \$550.0	Trust Fund Contribution Added) May B∈ to Fees	
(See criter	ria on back)	Make Check Payable to	Department of S	State 1		
11.	OFFICERS AND	DIRECTORS COACT SECTION 11	2.00 mg, tamik sv 24	10: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 30: 10: 74(p) 10: 10: 10: 10: 10: 10: 10: 10: 10: 10:	Addition	
TITLE F C	P. 185 A ST AND MAGNETS	□ Delete.	THE 32 A 523	Scrott State (1997) 1997 (1997		
NAME STREET ADDRESS	.3415 Prairie Avenue	the man of the parties of his good to a	TREET ADDRESS	นาครั้งใช้ใช้เลียง อีร์ยาครั้ง เรียบกับ		
CITY-ST-ZIP	Miami Beach, FE	中心分布性病病物域病其的	CITY-ST-ZIP , *P	常語は「自由者 13.6 Et 」という。 という。 といれば、 14 であった。		
TITLE THE TA	AS . १ क्षेत्रकार सम्बन्ध	また。そ 🧸 🖸 Deleter 愛味道 🗊	fice, tident, yearn	Sarato e contagno con la companya de la companya del la companya de la companya d	Addicate	
name Street address	Jan C. Cheezem 200-S. Biscayne Blvc			strandaministration of the Control of the Section 1985 - 850		
CITY-ST-ZIP	Miami, FL 33131	- こうついほうだ かぶんた 不過 経験は 5年は新書け	The Part of Lance	Mami, FI-33131		
TITLE C	THE TENESH IS VENEZULED	V TO TAUM E Delete O NOTE 1	11100	t consistence କଳ ଲୋଗର , ବର୍ଷ ଓ ବ୍ୟକ୍ତ ହେବା କଥାଚିତ୍ର ହେବା କଥାଚିତ୍ର (Change କରମ ଓ ଓ ମଧ୍ୟ ହେବା କଥାଚିତ୍ର ବ୍ୟକ୍ତ ଓ ଅନ୍ୟର୍ଥ । ଜଣ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ । ଜଣ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ । ଜଣ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ । ଜଣ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ । ଜଣ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ ଓ ଅନ୍ୟର୍ଥ ଅନ୍ୟର ଅନ୍ୟର୍ଥ ଅନ୍ୟର ଅନ୍ୟର ଅନ୍ୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନ୍ୟର ଅନ୍ୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନ୍ୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନୟର ଅନୟର ଅନ୍ୟର ଅନୟର ଅନୟର ଅନୟର ଅନୟର ଅନୟର ଅନୟର ଅନୟର ଅନ	Acc 327	
NAME	and the state of the second se	alle vertall art the \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	VAME	The and straight here of the last favor to		
STREET ADORESS CITY-ST-ZIP		,	STREET ADDRESS'	€aar. 2°	•	
TITLE S. S.		. Ala San T CHROSESAMATER &	11 - mrlv4 5 1 - 75	Change	Acc tot	
NAME *#L*	करार में इ.स. १०० के क्षेत्रिक के स्थाप त	· 1. Sec. 1. 21/2 the deposit black to the	NAME	painty with a construction of the consideration of the consideration of the construction of the constructi	4	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	tolition of the state of		
CITY-ST-ZIP	ारकारक इसे अवेक्सकरियाँ		Other Serain	Ut 1 5.55.0F ≤ T ☐ Change	Aggra-	
TITLE NAME	The THE LANGE HELDER		NAME TO LODIE 1911	· Service	_	
STREET ADDRESS	to the state of the second		STREET ADDRESS			
CITY-ST-ZIP T	The second of th		OTTY - ST-ZIPA 133 1.	·		
TITLE NAME	The state of the s	****	TITLE NAME	☐ Change	☐ 4cc * c *	
STREET ADDRESS	ប្រាំ មានសមទំន	<u>I</u>	STREET ADDRESS	•		
CITY-ST-ZIP		X66-73	CITY-ST-ZIP () /			
42 I barabu	and the the information available with	this filing does not disalify for the	-vomotion' ototodie	Section 119 07/3Vi) Florida Statutes further certify that its:	formetics	

13. Thereby certify that the information supplied with this filling 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 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 5 cold to changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04.07.0

305.538.1544