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G320 S.W. 103TH PLACE Street Address (PO. Ext Number is Not Acceptable) City FL Zip Code The above named endy submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. City FL Zip Code GNATURE Speak a host or name feed by submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. Onte Inte GNATURE Speak a host or name feed by submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. Inte Inte GNATURE Speak a host or name feed by submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. Inte Contribution. State of Forida Contribution. (See oritario on back) OFFICERS AND DIPECTORS Inte Contribution. Added to Fores (See oritario on back) OFFICERS AND DIPECTORS Inte Contribution. Added to Fores (See oritario on back) OFFICERS AND DIPECTORS Inte Control Added to Fores (See oritario on back) OFFICERS AND DIPECTORS Inte Control Added to Fores (See oritario on back) OFFICERS AND DIPECTORS Inte Control Added to Fores (See oritario on back) OFFICERS AND DIPECTORS In				Nam	e		يحمد البيبية الال	
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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	I. ILE ME REET ADDRESS IY-ST-ZIP IE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS HE REET ADDRESS	Pria on back) OFFICERS AND P GONZALEZ, BELARMINIO J 10235 SW 68TH ST MIAMI FL 33173 VP GONZALEZ, CLARISA 10235 SW 68TH ST	Make Check Pays	able to Departm 12. TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES STREET ADDRES	s s s s s s s s s s s s s s s s s s s	Trust Fund Contribution.	Adde	Addition
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 lf changed, or on an attachment with an address, with all other like empowered.	(See crite 1. TLE TLE THE TADDRESS TY-ST-ZIP TLE ME REET ADDRESS TY-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP	Pria on back) OFFICERS AND P GONZALEZ, BELARMINIO J 10235 SW 68TH ST MIAMI FL 33173 VP GONZALEZ, CLARISA 10235 SW 68TH ST	Make Check Pays	able to Departm 12. TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP	s s s s s s s s s s s s s s s s s s s	Trust Fund Contribution.	Adde	Addition