Principal Place of 2090 S NOVA RD STE K-1107 S DAYTONA FL 32 US 2. Principal Place of 1500 Bev Suite, Apt. #, Ste 6 City & State	2119 S Ce of Business	Mailing Address 090 S NOVA RD TE K-1107 DAYTONA FL 32119-8506 S			05-15-2000 90289 01		
1500 Bev Suite, Apt. #, Ste 6 City & State	ille Rd)	:0 (101) 10130 1131 11301 191; 1\101 101		
ì		3. Mailing Address 1500 Beville Suite, Apt. #, etc. Ste 606	Rd		DO NOT WRITE IN THIS SPACE		
Daytona Bch Fl Zip Country		City & State Daytona Bch F1 Zip Country			4. FEI Number 59-3117299 Applied For Not Applicable 5. Certificate of Status Desired — S8.75 Additional Fee Required		
32114-56	6. Name and Address of Current Re	32114-5644 gistered Agent	USA Name	7. Name and	Address of New Registered		
2090 S STE. K S DAYT	S, CHANDRA A. NOVA RD -1107 TONA FL 32119 amed entity submits this statement for the	e purpose of changing its	City So. Da		FL h, in the State of Florida.	Zip Code 321	.19
9. This corpora	gnature, typed or printed name of registered agent and ation is eligible to satisfy its Intangible quirement and elects to do so. on back)	FILE NOW!	Registered Agent signature of the State of t	10. Ele	DATE ction Campaign Financing st Fund Contribution.		0 May Be to Fees
NAME F STREET ADDRESS 2	OFFICERS AND DIF PVS FLORES, JAMES M. 2090 S NOVA RD, STE K-1107 S DAYTONA FL	\	12. TITLE NAME STREET ADDRESS]	ADDITIONS/	Rd Ste 606	(X) Change	S IN 11 Addition
TITLE NAME STREET ADDRESS	FLORES, CHANDRA 2090 S NOVA RD., STE K-1107 S DAYTONA FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	L500 Beville Daytona E	Rd Ste 606 Sch F1. 32114-5	R Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Change	☐ Addition
	rtify that the information supplied with the nation of the report of supplemental report is the pration of the receiver of trustee empower on an attachment with an address with		ny signature snail navi as required by Chapte	e the same legal effect er 607, Florida Statute		in Block 11 or	