| Street Address of New Registered Agent     Agent     Address of New Registered Agent     Name     Address of New Registered Agent     Name     Name     Street Address of New Registered Agent     Name     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zin     Street Address (P.O. Box Number is Not Acceptable)     Daft     Zin     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     Daft     Zin     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     Daft     Street Address (P.O. Box Number is Not Acceptable)     Daft     Delete     Name     Street Address (P.O. Box Number is Not Acceptable)     Daft     Delete     Name     Street Address     Stre | 50.00   |
|---|---|
| Principal Place of Business       Mailing Address         1001 WALLACE ST.       1001 WALLACE ST.         CORAL GABLES FL 33134       CORAL GABLES FL 33134-2456         2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         City & State       City & State         Zip       Country         Zip       Country         Zip       Country         Solite, Apt. #, etc.         OD NOT WRITE IN THIS SPACE         City & State       4. FEI Number         Country       Zip         Country       State         City & State       City & State         Country       Streat Address of New Registered Agent         REBENGA, RENE       Name         1001 WALLACE ST.       Streat Address (PO. Box Number is Not Acceptable)         City       FL         Zip       City         Corral GABLES FL 33134       City         B. The above named entity submits this statement for the purpose of changing its registered agent entities agent, or both, in the State of Florida.         SIGNATURE       Signature trad elects to do so.         (Stee conterior is eligible to satisfy its Intangible       File NOW III FEE IS \$150.00         This corporation is e   | Applied F<br>Not Applie<br>75 Additional<br>Required                          |
| 1001 WALLACE ST.<br>CORAL GABLES FL 33134       1001 WALLACE ST.<br>CORAL GABLES FL 33134-2436         2. Principiel Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Suite, Apt. #, etc.         City & State       4. FEI Number         City & State       4. FEI Number         City & State       5. Certificate of Status Desired         Z/p       Country         Zip       Country         Zip       Country         Zip       Country         Zip       Country         Suite, Apt. #, etc.       Name and Address of Current Registered Agent         Name       Name and Address of Current Registered Agent         Name       Name and Address of New Registered Agent         Name       Street Address (PO. Box Number is Not Acceptable)         Othy WALLACE ST.<br>CORAL GABLES FL 33134       City         B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.         SIGNATURE       Signature byset or printed name of registered agent and title if applicable         Its corporation is eligible to satisfy fis Intangible<br>Tax filing requirement and elects to do so.<br>Cisee or time to basks/ filing fraguree may and advect the office of State         11.       OFFICERS AND DIRECTORS         12.       ADDITIONS/CH   | Applied F<br>Not Applie<br>75 Additional<br>Required<br>ip Code               |
| 2. Principal Place of Business       3. Mailing Address         Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         City & State       City & State         Zip       Country         Zip       Country         Suite, Apt. #, etc.       Do NOT WRITE IN THIS SPACE         City & State       4. FEI Number         City & State       4. FEI Number         Country       5. Certificate of Status Desired         Foe Re       Foe Re         Country       5. Certificate of Status Desired         Street Address of New Registered Agent       Name and Address of New Registered Agent         REBENGA, RENE       Street Address (P.O. Box Number is Not Acceptable)         1001 WALLACE ST.       City         City       FL         Street Address (P.O. Box Number is Not Acceptable)         City       FL         City       FL         Street Address (P.O. Box Number is Not Acceptable)         City       FL         Street Address (P.O. Box Number is Not Acceptable)         City       FL         Street Address (P.O. Box Number is Not Acceptable)         Otto       Mater Street Address (P.O. Box Number is Not Acceptable)         Street Address (P.O. Box Number is Not Acceptable)       Dotto     <   | Applied F<br>Not Applie<br>75 Additional<br>Required<br>ip Code               |
| Suite, Apt. #, etc.       Suite, Apt. #, etc.       DO NOT WRITE IN THIS SPACE         City & State       City & State       4. FEI Number       65-0339005         Zip       Country       Zip       Country       6. Certificate of Status Desired       \$8.74         Fee Re  | Applied F<br>Not Applie<br>75 Additional<br>Required<br>ip Code               |
| City & State       City & State       4. FEI Number       65-0339005         Zip       Country       5. Certificate of Status Desired       \$6.77         Fee Re       Country       5. Certificate of Status Desired       \$6.77         Fee Re       Name and Address of Current Registered Agent       7. Name and Address of New Registered Agent       Name and Address of New Registered Agent         REBENGA, RENE       1001 WALLACE ST.       Street Address (P.O. Box Number is Not Acceptable)       City       FL       Zip         8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       Signature, typed or primed name of registered agent and title if applicable       (NOTE. Registered Agent signature registered when remetating)       DATE         9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)       FILE NOW!!! FEE IS \$150.00       10. Election Campaign Financing Tust Fund Contribution.       The ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       11. OFFICERS AND DIRECTORS       12. ADDITIONS/CHANGES TO OFF  | Applied F<br>Not Applie<br>75 Additional<br>Required<br>ip Code<br>\$5.00 May |
| Zip       Country       Zip       Country       5. Certificate of Status Desired       \$8.74<br>Fee Re   | Not Applia  |
| Street Address of Status Desired Control of Status Desired Agent     Status Desired Control of Status Desired Agent     Status Desired Agent     Name     Status Desired Agent     Name     Status Desired Agent     Street Address of New Registered Agent     Name     Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     City     FL     Zir      Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address (P.O. Box Number is Not Acceptable)     Daffe     Street Address     | ip Code   |
|   | ір Code<br>\$5.00 Мау   |
| REBENGA, RENE<br>1001 WALLACE ST.<br>CORAL GABLES FL 33134       Street Address (P.O. Box Number is Not Acceptable)         City       FL       Zip         B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.       Stignature, typed or printed name of registered agent and title if applicable         SIGNATURE   | \$5.00 May  |
| 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.   SIGNATURE   Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE   9. This corporation is eligible to satisfy its Intangible   Tax filling requirement and elects to do so.   (See criteria on back)     11.   OFFICERS AND DIRECTORS   12.   Addel TORS   13.   OFFICERS AND DIRECTORS   14.   D   REBENGA, RENE   STREET ADDRESS     STREET ADDRESS   | \$5.00 May  |
| SIGNATURE       Signature. typed or printed name of registered agent and title if applicable       (NOTE. Registered Agent signature required when reinstating)       DATE         9. This corporation is eligible to satisfy its Intangible<br>Tax filing requirement and elects to do so.<br>(See criteria on back)       FILE NOW !!! FEE IS \$150.00<br>After MAY 1, 2000 Fee will be \$550.00<br>Make Check Payable to Department of State       10. Election Campaign Financing<br>Trust Fund Contribution.       11.         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       12.         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       13.         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       14.         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       14.         11.       OFFICERS AND DIRECTORS       12.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS       15.         11.       CHARCE       Delete       TITLE       CHARCE       CHARCE         NAME       REBENGA, RENE       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS  | \$5.00 May  |
| NAME REBENGA, RENE NAME<br>STREET ADDRESS 1001 WALLACE ST. STREET ADDRESS   |   |
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| 13. 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 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 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 changed, or on an attachment with an address, with all other life empowered.   | at the informat<br>officer or dire  |