Secretary of State 05-05-2000 90082 003 *** 50.00 Walling Address	OCUMENT# 4	= V7185	8	N	May 05, 2	8 000	3:00 a
Mailing Address 44 KENSINGTON LANC LANTAMA, FL 33462 WITHOUSE OF Business PO. Box 16505 J. Mail of Actions PO. Box 16505 Sulla, April 9, 4500 Mail Sulla, April 9, 4500 Mail Sulla, April 9, 4500 Mail A sull 9, 500. B. Name and Address of Current Regulated Agent L. WEST PALM SEACH FL OF 33416 Country USA B. Name and Address of Current Regulated Agent L. WESLEY NICHOLS IT 3800 PROPRIETTY FARMS ROAD SUITE 112 PALM BERNAMINE STOR ADMINISTRATION IN MILE ACCORDING TO THE SUITE STORM The above Parent Certify summis this statement for the purpose of changing as required direct or opposed agent, or born, in this seal of Points The cooperation be eligible to basis or summer and used to the summer							
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Principal Place of Business P.O. Box 16505 Suite, April 4, etc.		•					
P.O. Box /6505 Suite, Apt 8 orc. Not Applicable 50	MANUANA, PE 37102	Z-no (no)	7, 72 33 70		C00832	45	
Suite Apt. #, etc. DO NOT WRITE IN THIS SPACE	Principal Place of Business	3. Mailing Address	2nx 11500				
September Sept	P.O. BOX 763.05 Suite, Apt. #, etc.		30/ /8303	<u>-</u>	DO NOT WRITE IN THIS	SPACE	
SATURE THE ENOWER PROJECTORS 17. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 8. Name and Address of New Registered Agent 9. Name and Address of New Registered Agent 9. Name and Address of New Reg	City & State City & State A SEST PAIM REACH FI	City & State	n BEACH FL	4. FEI Number	366567	├ ~ -	
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The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of FID office. NATURE NATURE	- ·	RMS ROAD	Street Add	dress (P.O. Box Number is N	Not Acceptable)		
City LANTANA FL Zip Code The above named entity submits this statement for the purpose of changing its registated office or registated agent, or both, in the State of Florida. WATURE Synature, Types or printed harm of inquisered agent and too if accessible This corporation is eligible to satisfy its intangible— Tax Ring requirement and elects to do so. Anto May 1; 2009 Fee will be \$550.00 Make Check Payable to Department of States OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN LI TITLE NAME SIRET ADDRESS 15 35 C CHERAY URBO A. CIPSTADR STREET ADDRESS 15 15 25 C CHERAY URBO A. CHERATYYLLE FL \$60 48 TITLE NAME SIRET ADDRESS CITY-ST-Zip Delete TITLE Addition Addition Addition Addition NAME SIRET ADDRESS CITY-ST-Zip Addition ADDRESS CITY-ST-Zip ADDRESS CITY-ST-		51 33410	2	377 CRAW	FORD CT.		
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Thereby certify that the information supplied with this filling does not dualify for the exemption state in Section 113-05(f). This duality and acquire and that my signature shall have the same legal effect as if made under oath; that I am an officer or director 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 if changed, or on an attachment with an address with all other like empowered.	Signature, typed or printed name of registered agent at this corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) OFFICERS AND PRESIDENT F. PETER BANTIN ET ADDRESS -SI-ZIP E EET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E EET ADDRESS -ST-ZIP E E E EET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E	FILE NOW After MAY 1, 2 Make Check Paya DIRECTORS Delete Delete Delete Delete Delete	VIII FEE IS \$150.00 2000 Fee will be \$55 able to Department 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ADDITIONS/CHA PRESIDENT PETER K. G. RO. BOX /6 WEST PALM B	INGES TO OFFICERS AN BANTING SOS EACH, FL 334	Added ODIRECTORS Change Change Change Change	to Fees S (N 11 Addition Addition Addition Addition