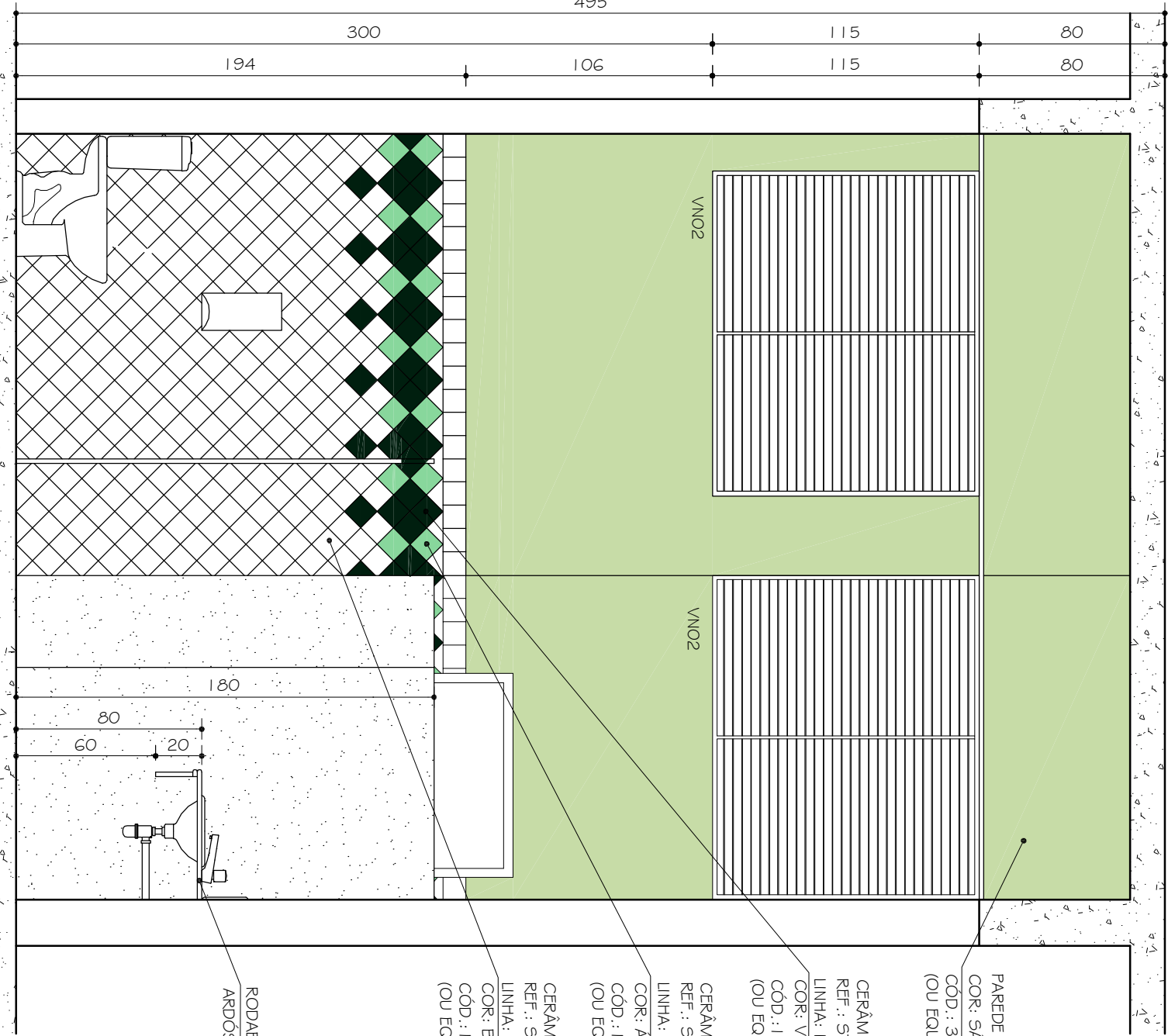
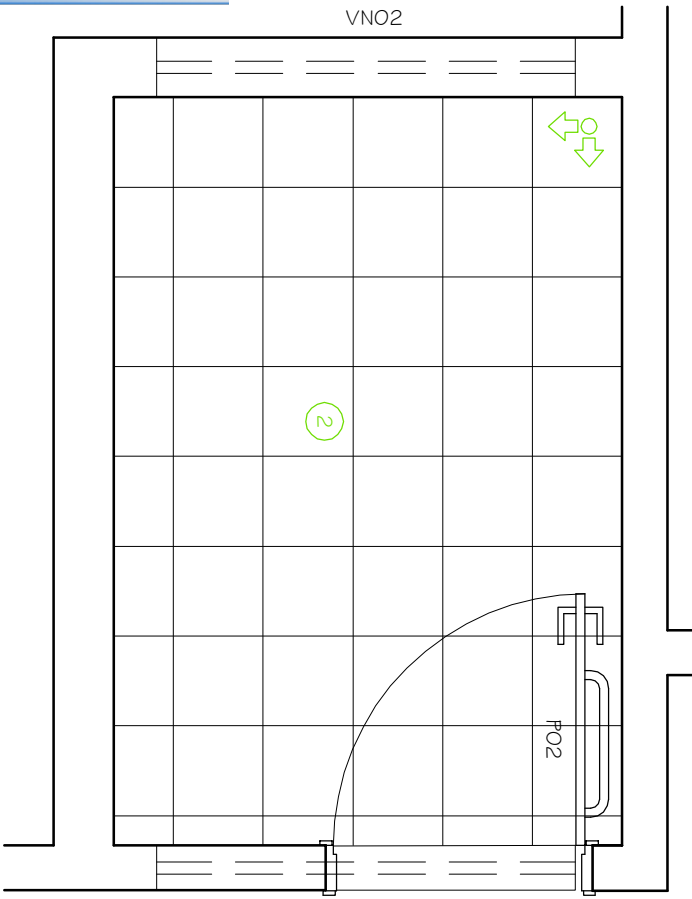
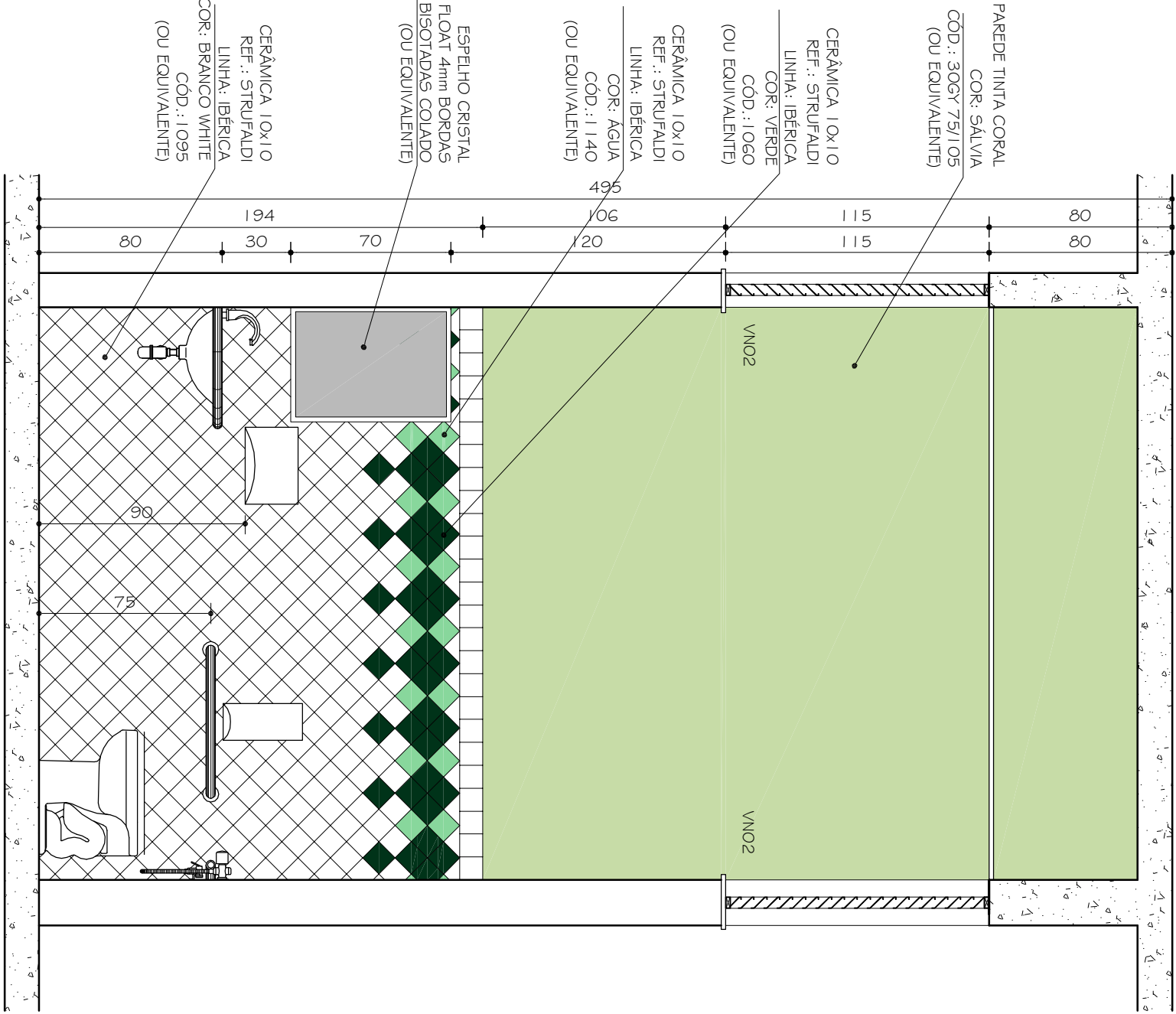




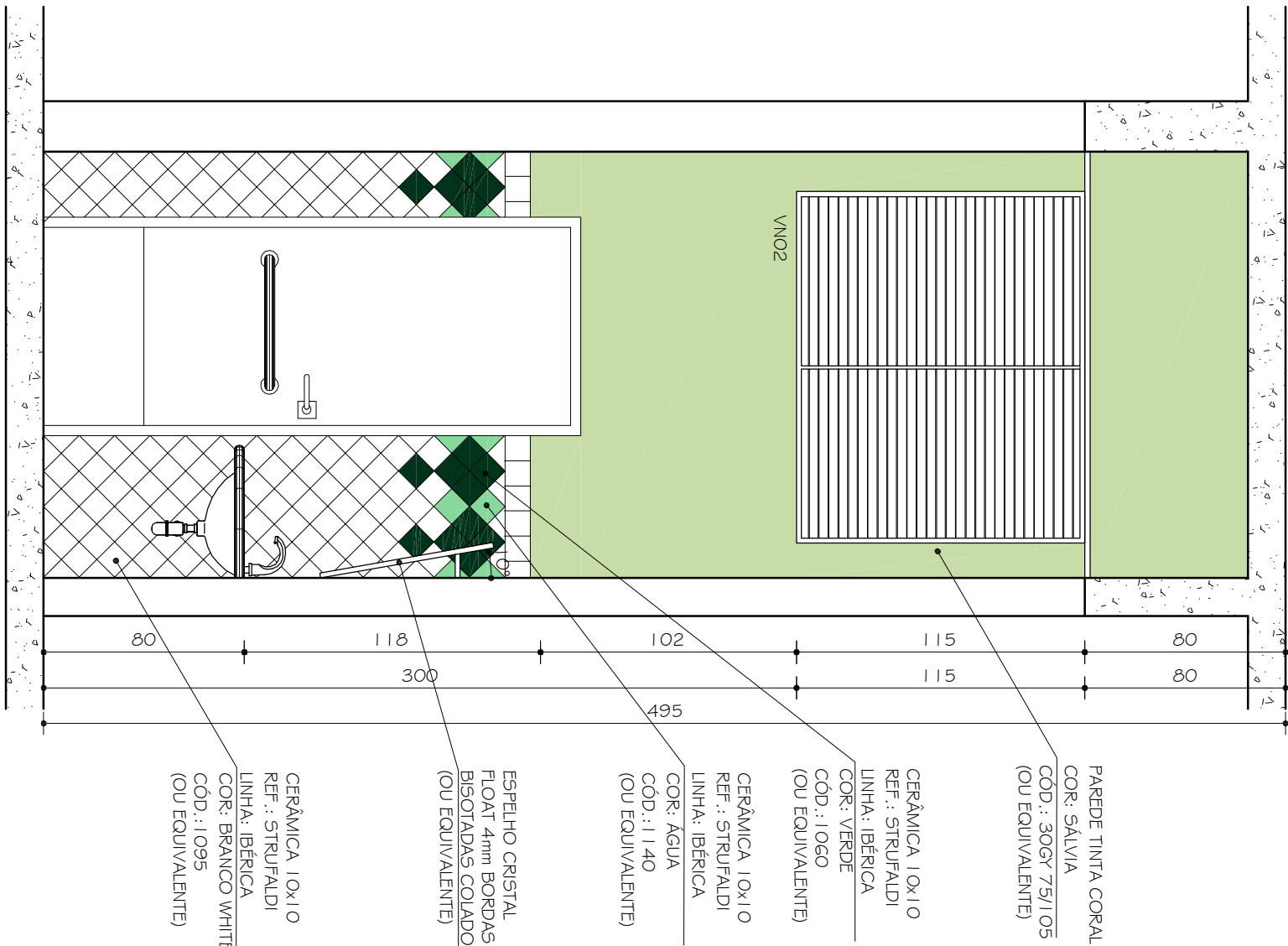
I.S. MASCULINO 01 / 03 / 05 IGUAL A
I.S. MASCULINO 02 / 04 / 06 INVERTIDOS
VISTA D
ESC. 1:25



ESC. 1:25



1.S.PNE MASculINO 01 / 03 / 05
1.S.PNE MASculINO 02 /
04 / 06 INVERTIDOS
VISTA B



1.S.PNE MASculINO 01 / 03 / 05
IGUAL A 1.S.PNE MASculINO 02 /
04 / 06 INVERTIDOS
VISTA C

OBS: REVISÃO DA CAIXA D'AGUA CONFORME DETERMINAÇÃO IEPHA.

[illegible]29/40