## NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Mar 03, 2003 8:00 am Secretary of State

DOCUMENT # 72/720			Secretary of State		
1. Entity Name HALE KULANI	PANDAMIR	riva la	03	-03-2003 90473	019 ****61.25
FIACO MOCOMICE	ASSOCI,	4+idMV			
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DO NOT WRI	TE IN THIS	S SPACE			
			}		
22 Principal Place of Business Ave 1		\$ 12th Avo S		•	
Suite, Apt. #, etc. Suite, Apt. #, etc. SHE. AA			DO NOT WRITE IN THIS SPACE		
Cayne State	OCity & State	H	4. EE+Monsber ; / (a)	مااب	Applied For
NAPLES FL	Maple	3, PC	39-192	0416	Not Applicable
34102 USA	3410	z DESA	5. Certificate of Status E	esired  Fe	3.75 Additional e Required
Name			7. Name and Address of Current Registered Agent		
DO NOT WRITE Street Address (P.O. Box Nurr				nontable)	
IN THIS		Silver Address (	F.O. DOX NUMBER NO AL		
	JFAUE				
	and the second	City		řů.	Zìp Code
The above named entity submits this statem the obligations of registered agent.	ient for the purpose of cha	nging its registered office or register	ed agent, or both, in the sta	ate of Florida. Fam fami	liar with, and accept
, <sub>et</sub>			أوسيان		
SIGNATURE Signature interest on pointed in section of requirem	d aport and the Tuepfeaple	(NOTE: Ringisteran Agant agrature recurso	when the Oktaboni	CATE	
			The state of the s	30.2	
	stion Campaign Financing at Fund Contribution.	\$5.00 May Be Added to Fees	e e e e e e e e e e e e e e e e e e e	e fortie Williams (1977) vers	
40	A DIRECTOR	and the second s			
10. OFFICERS AN	ID DIRECTORS	TITLE		100 A	22
STREET ADDRESS 755 301 AVI 5 # A1		NAME			(15(
CHY-ST-ZIP DADIES FL 34102		STREET ADDRESS City St ZIP			378
IME DATE LANKS	10	INE	AND THE REST		CRZE037B (12/02)
STREET ADDRESS 255 2Nd AV	NAME STREET ADDRESS		200 P. L. San C.	<i></i>	
CITY-ST-ZIP NGPLOS, T-C 34102		CITY ST-ZP			
MANE Ashrette Philip # 00		TITLE			
STREET ADDRESS 255, 2nd AVE. 5. B3 -		STREET ADDRESS	PO N	YT WOLT	
TOPICS FL 3410Z		COY ST-ZP	DO NOT WRITE		
HAVE Shelia Mayorey		MARE	····IN TH	IS SPACI	<b>E</b>
STREET ADDRESS 255 21d HV- 5.		STREET ADORESS			15,070 - 15,44 <b>8</b> , 15
	r $oun$	■ CITY ST-76P COST ST	· · · · · · · · · · · · · · · · · · ·	美国的 医多种医性 医多种皮肤 医多种	(I)
TIME DE CONTEN	C 09102	CITY ST ZBP:			

12. Thereby 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

HAME

STREET ADDRESS

CITY ST ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Offy-ST-ZIP

NAME

Z/27/03 239 242 5657