FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 10, 2002 8:00 am Secretary of State

CINIFORIVI BUSINESS REPORT (UBR)					04-10-2002 90754 001 ****8.75		
DOCUMENT # 21307					04-10-2002 90754 002 ***150.00		
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	DO NOT WRITE	IN THIS SE	ACE				
	Place of Business	3. Mailing Address					
Suite, Apt.	Baynedows Circle	Suite, Apt. #, etc.	trogos	5< (\l	としとい。 DO NOT WRITE IN THIS SPACE		
City & Stat	1,40 D/3	50 \ City & State	(9		FEI Number	Applied For	
>0C	112 - 110 -	Sackson		<u>-</u>	2d-3d1 1938	Not Applicable	
300 S	Solo Country AC	32256	Country	5. (Certificate of Status Desired \$8.75 A		
	The second of th		Name	7. Na	ime and Address of Current Registered Agent		
DO NOT WRITE Street Address (P				dross (P.O. B	P.O. Box Number is Not Acceptable)		
	ACE	813	8130 Baymodows Circle				
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0 The sheet			عمدا	KSDV.	11/10	_{జ్ఞ} వ్యక్త	
6. The above	e named entity submits this statement for t	10			7. 1 4.		
SIGNATURE	Signature, typod or printed name of registered agent a		STHER LAN Registered Agent signatur		G. Ngur 3-29-02 Ordinating) DATE	·	
9. This corpo	pration is eligible to satisfy its Intangible		ay 1 Fee is \$150.	00	140 Flanis Commiss Figure 4		
	requirement and elects to do so. ria on back)		I, Fee is \$550.00 UBR is \$61.25 le to Department	of State		.00 May Be led to Fees	
11.	OFFICERS AND D	<u>L</u>	Г				
TITLE NAME	gasi Sotherian	8	TITLE NAME				
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13. I hereby of indicated	certify that the information supplied with the on this report or supplemental report is tr	nis filing does not qualify for th ue and accurate and that my	e exemption stated i signature shall have	in Section 119 the same leg	9.07(3)(i), Florida Statutes. I further certify that the at effect as if made under eath; that I am an officer of a Statutes; and that my name appea is in Block.	information r director	
of the cor	rporation or the receiver or trustee empoy	wered to execute this report a	s required by Chap	ter 607, Florid	a Statutes; and that my name appea is in Block	11 or on an	