| 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L39864 1. Entity Name | | | | | | FILED May 19, 2000 8:00 am Secretary of State | | | | |
|---|--|---|--|---------------------------|---------------------|---|--|----------------------------------|-----------------|---------------------------|
| CBG & | ASSOCIATES, INC. | | | | İ | 3 | os-19-2000 9 | | | |
| Principal Plac | ce of Business | Mailing Address | | | | | | | | |
| 3221 NW 10 TERRACE SUITE 502 FT. LAUDERDALE FL 33309 | | 3221 NW 10 TERRACE SUITE 502 FT. LAUDERDALE FL 33309-5942 | | | | 1 (584) 111 805 | enn u 1828) 10110 0 1111 1 | 11 6 1 0 1014 StSt | didii bigii did | (1 8 1811 (1881 |
| 2. Principal f | Place of Business | 3. Mailing Address | | | | | | | | |
| Suite, Apt | . #, etc. | Suite, Apt. #, etc. | | | | DO NOT WRITE IN THIS SPACE | | | | |
| City & State | | City & State | | | 4. F | FEI Number | 59-2987288 | | | plied For t Applicable |
| Zip | Country | Zip | Co | untry | 5. (| Certificate of | Status Desired | | 8.75 Add | litional |
| | 6. Name and Address of Current | Registered Agent | | | 7. N | Name and Ac | Idress of New Re | gistered A | gent | |
| | | | | Name | | | | | | |
| COHEN, PHILIP A. | | | | Street A | ddress (P.O. B | lox Number is | Not Acceptable) | | | |
| , | 1 NW 10 TERRACE TE 502 | | | <u> </u> | | | | | | |
| | LAUDERDALE FL 33309 | | | | | | | | | |
| 4 | D WOLLONGE I'E GOOD | | | City | | | | FL | Zip Code | 9 |
| 8. The above | e named entity submits this statement for | or the purpose of changing | its registe | ered office or | registered age | ent, or both, i | n the State of Flori | da. | <u></u> | |
| | | | | | | | | | | |
| SIGNATURE | | | | | | | | | | |
| <u>.</u> | Signature, typed or printed name of registered agent | and title if applicable (I | NOTE: Registe | ered Agent signati | re required when re | einstating) | | DATE | | |
| 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! | | | | • | | 10. Election | on Campaign Fina | ncing | \$5.0 | 0 мау Ве |
| Tax filing requirement and elects to do so. (See criteria on back) | | | After MAY 1, 2000 Fee will be 3 Make Check Payable to Departme | | | Trust I | und Contribution. | | | to Fees |
| 11. | OFFICERS AND | | 12 | | | DITIONS/CH | ANGES TO OFFIC | PERS AND | DIBECTORS | S INI 11 |
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| NAME - | -COHEN, PHILIP-A. | <u> </u> | | ME | | | - . | | | |
| STREET ADDRESS | 3221 NW 10 TERRACE | | | REET ADDRESS | | | | | | i |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33309 | | C1 | TY-ST-ZIP | | | | | | <u>'</u> |
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NAME STREET ADDRESS