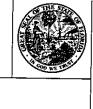
2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N03402

1. Entity Name



FILED Mar 06, 2003 8:00 am § Secretary of State

03-06-2003 90121 001 ****61.25

| | NI AND BEHNIE CUHEN FOU | | | 9 | | | | |
|--|---|--|--|--------------------------------------|--------------------------------|--------------------------|---|--|
| Principal Place of Business ** ROBERT M. ARLEN 110 E ATLANTIC AVE. #330 DELRAY BEACH FL 33444 | | Mailing Address % ROBERT M. ARLEN 110 E ATLANTIC AVE. # DELRAY BEACH FL 3344 | 330 | | 00 JULI 01011 00110 1101 02111 | - | 1/2 11 818 14 18 8 4 | |
| 2. Principal | Place of Business | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. City & State | | Suite, Apt. #, etc. City & State | | ☐ CHECK HERE IF MAKING CHANGES | | | | |
| | | | | 4. FEI Number 59-2413400 Applied For | | | Applied For | |
| Zip | Country | Zip | Country | 5. Certificate of Sta | tus Desired | \$8.75 A | | |
| | 6. Name and Address of Current I | Registered Agent | | 7. Name and Addre | ess of New Registere | Fee Requir | ea | |
| | | | Name | | or new neglatere | w Ayent | | |
| | ROBERT M | The second secon | | (0.0.0 | | | | |
| | TLANTIC AVE | Street Addres | | (P.O. Box Number is Not Acceptable) | | | | |
| 330 | | | | 7/1 | | | | |
| | BEACH FL 33444 | | City | • | ⊢ | Zip Cod | | |
| the obliga | | | | | e State of Horida. Tai | m ramınar witn | , and accept | |
| <u>. </u> | Signature, typed or printed name of registered agent ar | nd title if applicable. (NO | TE: Registered Agent signature requ | rired when reinstating) | DATE | | | |
| | FILE NOW: FEE IS \$61.25 | | mpaign Financing Contribution. | \$5.00 May Be Added to Fees | Make Che Florida Depa | ck Payable artment of | to State | |
| 10. | OFFICERS AND DIRE | CTORS | 11. | ADDITIONS/CHANGES | TO OFFICERS AND I | DIRECTORS IN | V 10 | |
| NAME STREET ADDRESS CITY-ST-ZIP | PD COHEN, BERTHA F. 11 ISLAND AVE, #1404 MILMI BEACH FL 33139 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Change | Addition | |
| TITLE NAME STREET ADDRESS | STD ENGELS, NANCY C. 8034 FISHER ISL DR | ☐ Delete | TITLE | | | | | |
| -CITY-GT-ZIP | MIAMI FL 33109 | | NAME STREET ADDRESS CITY-ST-ZIP | | ٦ | Change | ☐ Addition | |
| TITLE | MIAMI FL 33109 | Delete | STREET ADDRESS CITY-ST-ZIP TITLE | , | ٦ | | | |
| TITLE | MIAMI FL 33109 AS ARLEN, ROBERT M. | ☐ Delete | STREET ADDRESS CITY-ST-ZIP | - | مرابعة . ع | ☐ Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MIAMI FL 33109 AS ARLEN, ROBERT M. 110 E ATLANTIC AVE, #330 DELRAY BEACH FL 33444 | Delete | STREET ADDRESS CITY-ST-ZIP TITLE | - | 7 | | | |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | MIAMI FL 33109 AS ARLEN, ROBERT M. 110 E ATLANTIC AVE, #330 DELRAY BEACH FL 33444 D ENGLES, MARTIN 8034 FISHER ISLAND DRIVE | ☐ Delete☐ Delete☐ Delete☐ Delete | STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | - | 1 | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | MIAMI FL 33109 AS ARLEN, ROBERT M. 110 E ATLANTIC AVE, #330 DELRAY BEACH FL 33444 D ENGLES, MARTIN | ☐ Oelete | STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP | - | ণ | ☐ Change | ☐ Addition | |
| NAME STREET ADDRESS | MIAMI FL 33109 AS ARLEN, ROBERT M. 110 E ATLANTIC AVE, #330 DELRAY BEACH FL 33444 D ENGLES, MARTIN 8034 FISHER ISLAND DRIVE | | STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | - | 1 | ☐ Change | Addition | |

12. I hereby 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 at trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: