2003 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 17, 2003 8:00 am Secretary of State

1. Entity N	IVI⊏IN I # P00000020√ lame	453				03-17-20	002 2107	1 010	
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2. Principal	I Place of Business	3. Mail	3. Mailing Address						
Suite, Apt. #, etc.		Suite	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City	& State						Applied F
Zip	Country	Zip		Country	у	59-3629675 5. Certificate of Status Desired	\$8.		Not Applica Additional
6.	Name and Address of Curre	nt Register	ed Agent	<u>L </u>	7		Fee	Requir	ed
	·····	giotoi	ou Agent		Name /.	Name and Address of New I	Registered	Agent	<u> </u>
HAYRE, GU							A _ + +	:	
	MORAN BLVD.,STE.2-J		•		Street Addre	ess (P.O. Box Number is Not A	cceptable)		-
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o. The abov	e named entity submits this sta	atement for	the purpose o	f changing	its registered	d office or registered agent, or l	both, in the	State	of Florida.
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SIGNATURE	Signature, typed or printed name of reco	istered agent or	nd fittle if applicable	NOTE	Davistand				
SIGNATURE	Signature, typed or printed name of reg	istered agent ar		 		nt signature required when reinstating)	Date		
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