

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

04-17-2001 90164 018 ***158.75

A0051183

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000101158

1. Entity Name
 Pinnacle Hoosing Group, Inc. ✓

Principal Place of Business
 2665 South Bayshore Dr.
 Ste 202
 Coconut Grove, FL 33133

Mailing Address
 2665 South Bayshore Dr.
 Ste 202
 Coconut Grove, FL 33133

2. Principal Place of Business
 9400 S. Dadeland Blvd
 Suite, Apt. #, etc.
 suite 100
 City & State
 Miami, FL

3. Mailing Address
 9400 S. Dadeland Blvd
 Suite, Apt. #, etc.
 Suite 100
 City & State
 Miami, FL

4. FEI Number
 65-0948918

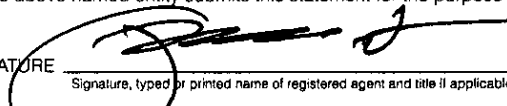
5. Certificate of Status Desired \$8.75 Additional Fee Required

Zip Country Zip Country
 33156 33156

6. Name and Address of Current Registered Agent
 Wohl, Michael D.
 2665 South Bayshore Dr.
 Ste. 202
 Coconut Grove, FL 33133

7. Name and Address of New Registered Agent
 Name: Wohl, Michael D
 Street Address (P.O. Box Number is Not Acceptable): 9400 S Dadeland Blvd. suite 100
 City: Miami FL Zip Code: 33156

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:  Michael D. Wohl, President 4/11/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

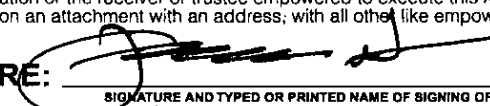
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Wohl, Michael D 9400 S Dadeland Blvd. suite 100 Miami, FL 33156 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C Wolfson, Louis III 9400 S Dadeland Blvd. suite 100 Miami, FL 33156 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP Deutch, David 9400 S. Dadeland Blvd. suite 100 Miami, FL 33156 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVP Friedman, Mitchell 9400 S. Dadeland Blvd. suite 100 Miami, FL 33156 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address; with all other like empowered.

SIGNATURE:  Michael D. Wohl 4/11/01 (305)854-7100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)