## 2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nar	JMENT # P0000( SOUTH FLORIDA, INC.	0071169		Secretary of State 04-26-2002 90020 036 ***150.00
Principal Place of Business .6278.NORTH FEDERALHWY STE. 208 .FT, LAUDERDALE FL 33308		Mailing Address 6278 NORTH FEDERAL HW FT. LAUDERDALE FL 33308		
9 Principal	Diago of Business			
2. Principal Place of Business		3. Mailing Address		1 (0011051 11) 00111 00111 00111 00111 00111 10011 11001 11001 11001 11115 1011 1001
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE
City & State		City & State		4. FEI Number 65-1035475 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Current Re	egistered Agent		7. Name and Address of New Registered Agent
Tagana to the			Name	
			Street Addres	ss (P.O. Box Number is Not Acceptable)
, <del>-</del> -			City	FL Zip Code
8. The above	a named entity submits this statement for the	ne purpose of changing its re	aistered office or reais	stered agent, or both, in the State of Florida.
SIGNATURE	and the second s	e myeli se nin se se giri	· -	- , · · · · · · · · · · · · · · · · · ·
	Signature, typed or printed name of registered agent and	1	egistered Agent signature requ	ulred when reinstating) DATE
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  Ma			FEE IS \$150.00 Fee will be \$550.00 to Department of \$	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11.	OFFICERS AND DI	RECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD   TIERNEY, JAMES R   6278 NORTH FEDERAL HWY., STE   FT. LAUDERDALE FL 33308	□ Delete E. <b>208</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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of the corr	OF CHIS TEDOTE OF SUDDIEMENTAL TEDOTE IS ME	e and accurate and that my s	tionatura chail hava the	Section 119.07(3)(i), Florida Statutes. I further certify that the information e same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

James R Tierne Ame of Sand Officer of Director

04/15/2002

954-772-0342 Daytime Phone #