**150.00

2002 UNIFO	FILED	
DOCUMENT # 1. Entity Name	May 01, 2002 Secretary of	
ROSENBLUM CELLAF	05-01-2002 91 479 032 *	
Principal Place of Business	Mailing Address	
2900 MAIN STREET ALAMEDA CA 94501	2900 MAIN STREET ALAMEDA CA 94501	

2900 MAIN STREET ALAMEDA CA 94501		2900 Main Street Alameda Ca 94501							
2. Principal Place of Business ,3. Mailing Address			,3: Mailing Address			1	 	PIBIL BIBIL BIBIL (CDI)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4.	00 0450474		Applied For - Not Applicable		
Zip Country		Zip Country		5.	5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
KEN, LAPHAM 2418 MARATHON LAŃE FT. LAUDERDALE FL 33312					Name Street Address (P.O. Box Number is Not Acceptable)				
			City			FL Zip	Code		
8. The above	named entity	submits this statement for	the purpose of changing its i	registered office	or registered ag	gent, or both, in the State of Flo	rida.		
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 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. (See criteria on back) FILE NOW! After May 1, 200 Make Check Payable				\$550.00	10. Election Campaign Fina Trust Fund Contribution	· - •	5.00 May Be dded to Fees		
11.	•	OFFICERS AND D		12.	· •	ODITIONS/CHANGES TO OFFI			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSENBL 3209 LIBE ALAMEDA		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	62 Ki	W. Flock lkenny Place da, CA 94502	☐ Cha	nge 🙀 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	925 ENSE	UM, ROGER NADA Y CA 94707	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Direct Willia	tor am D. Willifor Dakland Ave.	□ Cha	nge 🔀 Addition	
NAME STREET ADDRESS CITY-ST-ZIP	D SIRNA, MI 1812 BUT PLEASAN		. Delete,	NAME STREET ADDRESS CITY-ST-ZIP	- ಬಳಬಹುಳ್ಳುತ್ತು	nd, CA 94611	☐ Cha	nge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZĮP	D MEADOW:	s, dwight Age drive	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	☐ Chai	nge 🗌 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO THOMPSO 1978 ARD)n, denise	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chai	nge 🗖 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chai	nge	

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: