SIGNATURE:

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)					FILED Apr 30, 2003 8:00 am Secretary of State		
DOCUMENT # P92000014909 nc							
1. Entity Nam		04-30-2003 901	151 008 ***150.0)O			
SHAPIRO, BLASI & WASSERMAN, P.A.							
Principal Place of Business 7777 GLADES RD SUITE 200 BOCA RATON FL 33434 US		Mailing Address 7777 GLADES RD SUITE 200 BOCA RATON FL 33434 US					
	Place of Business Clades Rd	3. Mailing Address 6/ac	les Rd	<u>.</u> .	I 10021600 / 140 10410 11024 00441 80111 1	/0/222	D
Suite, Apt. #, etc. 110		Suite, Apr. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
Bo Ca	Katon, +L	Bocg Raton	,FL		4. FEI Number 65-0376849	No	pplied For ot Applicable
Zip 331		^{Zip} 33434	Country U.S	. : =	5. Certificate of Status Desired	S8.75 Add Fee Require	
6. Name and Address of Current Registered Agent Name Name Name Name Name Name Name							
SHAPIRO, MICHAEL Street Address				ddress (F	~		
7777 GLADES RD				777	20. Box Number is Not redeptable)		
SUITE 200 BOCA RATON FL 33434				Doc	2 110	FL Zip Cod	31171
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. I am familiar with, and accept the obligations of registered agent.							
4/24/03							
SIGNATURE Signature, typed or printed name of high states and twis 4 applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					9. Election Campaign Finan Trust Fund Contribution.	~ _ ++	May Be to Fees
10.	OFFICERS AND D	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS	3 IN 11
TITLE [†] NAME STREET ADDRESS CITY-S [†] -ZIP	DPT SHAPIRO, MICHAEL B 7777 GLADES RD., STE 200 BOCA RATON FL	☐ Delicte	TITLE NAME STREET ADDRESS CITY-ST-ZIP	į		☐ Change	☐ Addition }
TITLE	DVS	☐ Delete	TITLE	7		Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP	DECTOR, ANDREW M 7777 GLADES RD., STE 200 BOCA RATON FL		NAME STREET ADDRESS : CITY-ST-ZIP	And	rew M. Dector Clades Rd., Ste 140		
TITLE	DV	□ Delete	TITLE	<u> 12</u>	Ca Ration, IL 39737	Change	Addition
NAME STREET ADDRESS	BLASI, ANDREW 7777 GLADES RD STE 200	C Doloio	NAME STREET ADDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		CITY-ST-ZIP				
NAME	V PIAZA, VINCENT J	Delete	NAME			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	7777 GLADES RD STE 200 BOCA RATON FL 33434	!	STREET ADDRESS CITY-ST-ZIP				{
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	DV Jef	S frey P. Wasserman Glades Rd., St. 100	☐ Change	Addition
CITY-ST-ZIP			CITY-ST-ZIP		oca Ration, FL 33434	<u> </u>	
TITLE NAME		☐ Delete	TITLE NAME	Dani	el R. Levine	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	7777 130	Glades Rd., Ste 140 ca Ration, FL 33434		
indicated of the cor	certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trusted embors or on an attachment with an addless,	rue and accurate and that my vered to execute this report as	signature shall h	ed in Sec	ction 119.07(3)(i), Florida Statutes. I fu	h: that I am an officer :	or director L