FILED May 05, 2003 8:00 am

2003	FOR	PROFIT	CORPORA	TION
UNIFO	RM B	USINESS	REPORT	(UBR

DOCUMENT # 162074 1. Entity Name THE ARAGON GROUP, INC.						Secretary of State 05-05-2003 90317 041 ***158.75						
Principal Place of Business 301 E. DANIA BEACH BLVD. P.O. BOX 1107 DANIA FL 33004 US 2. Principal Place of Business			Mailing Address 301 E. DANIA BEACH BLVD. P.O. BOX 1107 DANIA FL 33004 US 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City & State					4. FEI Number 59-0698290 Applied Fo Not Applied				plied For t Applicable
Zip		Country	Zip Cou		Countr	гу		5. Certificate of Status Desired \$8.75 A Fee Requi			8.75 Add ee Require	litional d
	6. Name	and Address of Current I	Registere	d Agent			- ,	-7N	lame and Address of New Regis	tered A	gent	
MORRIS, CLINTON E JR. 301 E DANIA BEACH BLVD.				-	Name Street Address (P.O. Box Number is Not Acceptable)							
DANIA FL 33004			ļ.									
					}	City		FL Zip Code				
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.								and accept				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 Financi Trust Fund Contribution.	ng		0 May Be to Fees	
10.		OFFICERS AND I	DIRECTO	RS	11.			ADE	DITIONS/CHANGES TO OFFICER	S AND I	DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP		STEPHEN F IIA BCH BLVD		☐ Delete	TITLE NAME STREE	T ADDRESS					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KNOX, D F	RIA BCH BLVD		□ Delete	TITLE NAME STREE CITY-S	T ADDRESS					☐ Change	Addition
title Name Street address City-St-Zip	D Snyder, 3 301 e dan Dania fl	IIA BCH BLVD		Delete		T ADDRESS ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUBSCH, 7330 SW 5 MIAMI FL	Robert H. 22 CT		□ Delete	TITLE NAME STREET CITY-S	T ADORESS ST-ZIP					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		CLINTON E. J NIA BEACH BLVD. 33004		☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS	VSS				Change Change	☐ Addition
TITLE				☐ Delete	TITLE				 _		☐ Change	☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SICOLUS REQUIREDStephen F. Snyder SIGNATURE AND TYPED OR PAINTED NAME OF SIGNING OFFICER OR DIRECTOR