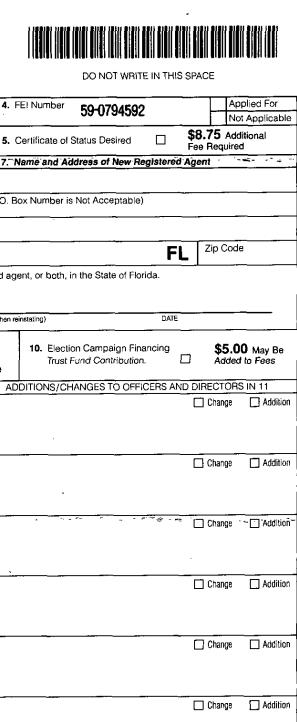
2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # 195840** 1. Entity Name 1109 N W 22ND STREET CORPORATION Mailing Address Principal Place of Business 7694 LA CORNICHE CR 7694 LA CORNICHE CR **BOCA RATON FL 33433-6006 BOCA RATON FL 33433** 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FE! Number 59-0794592 Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name **JOEL CROSS** Street Address (P.O. Box Number is Not Acceptable) 7694 LA CORNICHE CIRCLE BOCA RATON FL 33433 City 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 (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State

Jun 09, 2000 8:00 am Secretary of State

06-09-2000 90023 048 ***550.00



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 with all other like empowered changed, or on an attachme

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JOEL CROSS

MICHAEL CROSS

4378 N DIXIE HWY

7694 LA CORNICHE CIRCLE

BOCA RATON FL 33433

OAKLAND PARK FL 33334

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OFFICERS AND DIRECTORS