REMINGTON DEVELOPMENT CORPORATION Mailing Address Principal Pace of Business Mailing Address 1740 WEST DIRE HOHMAY Mailing Address NORTH MAMI BEACH FL 3360 Mailing Address 2. Principal Place of Business State, Apt. 4, etc. 30.14, Apt. 4, etc. State, Apt. 4, etc. Bille, Apt. 4, etc. State, Apt. 4, etc. Bille, Apt. 4, etc. Country Bille, Agt. 4, etc. Country Country Country Bille, GEORGE N The address of Currient Registered Agent 17400 W. DXE HIGHWAY Streel Address of New Registered Agent Norme Streel Address of New Registered Agent 17400 W. DXE HIGHWAY Streel Address of New Registered Agent 10400 W. DXE HIGHWAY Streel Address of New Registered Agent 11400 W. DXE HIGHWAY Streel Address of New Registered Agent 11500 May Streel Address of Doth, In the State of Foordea. 11610 Mark Flex St		DO3 FOR PROFIFORM BUSINMENT #21224	ESS REPOR	RATION RT (UBR)	FILED Aug 25, 2003 8:00 Secretary of Stat 08-25-2003 90097 023 ***150.00		
17400 WEST DURE HIGHWAY NORTH MAMI BEACH FL 33160 17400 WEST DURE HIGHWAY NORTH MAMI BEACH FL 33160 2. Principal Place of Busingstone Bulle, April, etc. Suite, April, #, etc. 2. Principal Place of Busingstone Bulle, April, # etc. Suite, April, #, etc. 3. Mailing Address Bulle, April, # etc. City & State 3. Mailing Address Bulle, April, # etc. City & State 3. Mailing Address Bulle, April, # etc. City & State 4. FEI Number Balle, April, # etc. City & State 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 17400 W. DXIE HIGHWAY NORTH MAMI FL 33160 Street Address (P.O. Box Number is Not Acceptable) Anter Segetament for the purpose of changing its registered agent, or both, in the State of Florida. Lan familiar using water agent and the registered agent. SIGNATURE State 9 owne works entity submits this subsement for the purpose of changing its registered agent, or both, in the State of Florida. Lan familiar using and the registered agent. SIGNATURE State OFFICERS AND DIRECTORS 11. Address State 9 owne works entity submits this subsement for the purpose of changing its registered agent, or both, in the State of Florida. Lan familiar using and the registered agent. SIGNATURE State OFFICERS AND DIRECTORS 11. <td< th=""><th></th><th></th><th>PORATION A</th><th></th><th></th><th>0</th></td<>			PORATION A			0	
Automatic Address Suite, Apt. #, etc. Check HERE IF MAKING CHANGES Buile, Apt. #, etc. City & State 4. FEI Number 65-0147117 Applied PC Buile, Apt. #, etc. City & State 4. FEI Number 65-0147117 Applied PC Buile, Apt. #, etc. City & State 4. FEI Number 65-0147117 Applied PC Buile, Apt. #, etc. Country 5. Certificate of Status Desired \$82.75 Additional Fee Feaulted Buile, Apt. #, etc. Country 5. Certificate of Status Desired \$82.75 Additional Fee Feaulted City Street Address of New Registered Agent Name Street Address of New Registered Agent Street Address of New Registered Agent LEADER, GEORGE N. Trade advertement for the purpose of changing its registered office or registered agent, or both, in the State of Fiorida. I am familiar with, and acc NORTH MIAMI FL Street Advert agreave registered agent, or both, in the State of Fiorida. I am familiar with, and acc Street September 10, 2003 Fee will be \$750.00 Name Street Advert agreave registered agent, or both, in the State of Fiorida. I am familiar with, and acc Intel Baove nemed entity submits this statement for State Intel North Intel No	7400 WEST	DIXIE HIGHWAY	17400 WEST DIXIE HIG				
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State CHCK HERE IF MAKING CHANGES Image: A State City & State 4. FEI Number G5-0147117 Applied F: Image: A State Country S. Certificate of Status Desired State Fee Required Image: A State Country S. Certificate of Status Desired State Fee Required Image: A State Country S. Certificate of Status Desired State Fee Required Image: A State Name Name and Address of Current Registered Agent 7. Neme and Address of New Registered Agent Image: A State Name Name Name State Address (PO. Box Number is Not Acceptable) Image: A Address of registered agent. Name Street Address (PO. Box Number is Not Acceptable) 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 accent the objection Campaign Financing Exter Address (PO. Box Number is Not Acceptable) NORTH MAMIL FE IS \$550.00 Image: Address of No 2003 Fee will be \$750.00 Image: Address of Control Department of State Image: Address of Control Department of State Address OFF. CERS AND DIRECTORS If Address of contread agent is address of Control Department of State <td></td> <td></td> <td>3. Mailing Address</td> <td><u>.</u></td> <td></td> <td> </td>			3. Mailing Address	<u>.</u>		 	
Image: Second	<u> </u>		Suite, Apt. #, etc.				
Country S. Certificate of Status Desired Status S	City & Stat	n-El.	City & State		65-(114/11/		
LEADER, GEORGE N Name 17400 W. DIXE HIGHWAY Street Address (P.O. Box Number is Not Acceptable) NORTH MIAMI FL 33160 City 1 City The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acceptable Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL Street Address (P.O. Box Number is Not Acceptable) City FL City FL Defice Name Street Address (P.O. Box Number is Not Acceptable) <	Zin		Zip	Country	5 Certificate of Status Desired 38.75 Addition		
LEADER, GEORGE N Street Address (P.O. Box Number is Not Acceptable) 17400 W. DIXIE HIGHWAY City FL Zip Code 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 acceptable City FL Zip Code 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 acceptable City FL Zip Code GNATURE Street Address (P.O. Box Number is Not Acceptable) OATE 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 acceptable City FL Zip Code GNATURE Street Address (P.O. Box Number is Not Acceptable) OATE The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and acceptable OATE FLE NOW!!! FEE IS \$550.00 Mater State		6. Name and Address of Curren	t Registered Agent	Name	7. Name and Address of New Registered Agent		
NORTH MIAMI FL 33160 City FL Zip Code 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 acc the obligations of registered agent. International agent and the familiar with, and acc the obligations of registered agent. GNATURE	•			-			
The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorida. I am familiar with, and acc the obligations of registered agent, or both, in the State of Fiorida. I am familiar with, and acc GNATURE Signature, typed or printed name of regulared agent and tits # applicable. (NOTE Registered Agent aignature reculted when reinstaince) FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 ake Check Payable to Florida Department of State OFFICERS AND DIRECTORS I. OFFICERS AND DIRECTORS I. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II. LEADER, GEORGE N. 17400 W. DIXE HIGHWAY NORTH MIAMI FL. EE LEADER, DIANA T. EE LEADER, DIANA T. EE EE LEADER, DIANA T. EE EE EE EE EE EE EE EE EE E							
the obligations of registered agent. SINATURE SIGNATURE SIGNATURE SIGNATURE, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstating) FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 ake Check Payable to Florida Department of State OFFICERS AND DIRECTORS OFFICERS AND DIRECTORS I1. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 E P CADER, GEORGE N. TA400 W. DIXIE HIGHWAY STREET ADDRESS Y-ST-2IP NORTH MIAMI FL E AE ET ADDRESS CTTV-ST-2IP E E AE ET ADDRESS CTTV-ST-2IP CTTV-ST-2IP E E AE ET ADDRESS CTTV-ST-2IP CTT) 1	<i>چ.</i> م		City	FL Zip Code		
SNATURE			for the purpose of changing it	ts registered office or regist	ered agent, or both, in the State of Florida. I am familiar with, and	accept	
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00 \$5.00 May Atter September 10, 2003 Fee will be \$750.00 ake Check Payable to Florida Department of State Interview of the state \$5.00 May Added to Fee Defecers AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 LE P Defecers AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 LE P Defecers Intre Change Ad V-ST-2IP NORTH MIAMI FL Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Change Ad Me LEADER, DIANA T. Defecer Title Make Citry-ST-ZiP Change Ad Y-ST-ZIP NORTH MIAMI FL Defecer Title AdMeE Citry-ST-ZiP Change Ad Y-ST-ZIP NORTH MIAMI FL Defecer Title MAME Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Citry-ST-ZiP Ad Keet ADDRESS Y-ST-ZiP Defete Title MAME Citry-ST-ZiP Citry-ST-ZiP Change Ad<	GNATURE .	4	nt and title if applicable. (NC	ITE: Registered Agent signature requi	ed when reinstating) DATE		
LE P Delete TITLE Change Ad ME LEADER, GEORGE N. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NORTH MIAMI FL Delete TITLE Ad LE S Delete TITLE Ad ME LEADER, DIANA T. Delete TITLE Ad NORTH MIAMI FL Delete TITLE Ad VY-ST-ZIP NORTH MIAMI FL Change Ad NKE LEADER, DIANA T. NAME STREET ADDRESS Ad TY-ST-ZIP NORTH MIAMI FL CITY-ST-ZIP CITY-ST-ZIP Change Ad NE Delete TITLE NAME CITY-ST-ZIP Ad NORTH MIAMI FL Delete TITLE Change Ad ME STREET ADDRESS CITY-ST-ZIP Change Ad ME Delete TITLE Change Ad ME Delete TITLE Change Ad ME Delete TITLE Change Ad NAME STREET ADDRESS	After Se	ptember 10, 2003 Fee will be \$75					
ME LEADER, GEORGE N. I7400 W. DIXIE HIGHWAY STREET ADDRESS Y-ST-ZIP NORTH MIAMI FL. LE S Ve LEADER, DIANA T. IFEET ADDRESS I7400 W. DIXIE HIGHWAY Y-ST-ZIP Delete NORTH MIAMI FL City-ST-ZIP NORTH MIAMI FL Change LEADER, DIANA T. NAME STREET ADDRESS TA00 W. DIXIE HIGHWAY Y-ST-ZIP NORTH MIAMI FL LE City-ST-ZiP NORTH MIAMI FL City-ST-ZiP LE Delete TITLE City-ST-ZiP NORTH MIAMI FL City-ST-ZiP LE Delete TITLE City-ST-ZiP LE Delete TITLE Change Ad STREET ADDRESS Y-ST-ZiP City-ST-ZiP LE Delete TITLE Change Ad Ad AE Delete KE ADDRESS STREET ADDRESS K- ADDRESS STREET ADDRESS LE ADDRESS	-			· •			
LE S Delete TITLE Change Adit ME LEADER, DIANA T. NAME STREET ADDRESS STREET ADDRESS CiTV-ST-ZIP CiTV-ST-ZIP CiTV-ST-ZIP CiTV-ST-ZIP CitV-ST-ZIP CitV-ST-ZIP CitV-ST-ZIP Change Adit LE Delete Delete TITLE CitV-ST-ZIP CitV-ST-ZIP Change Adit LE Delete TITLE STREET ADDRESS CitV-ST-ZIP CitV-ST-ZIP Change Adit LE Delete TITLE STREET ADDRESS CitV-ST-ZIP Change Adit LE Delete TITLE STREET ADDRESS CitV-ST-ZIP Change Adit LE Delete TITLE STREET ADDRESS CitV-ST-ZIP Change Adit LE Delete STREET ADDRESS STREET ADDRESS CitV-ST-ZIP Change Adit LE Delete STREET ADDRESS STREET ADDRESS Change Adit LE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	/E Eet address	LEADER, GEORGE N. 17400 W. DIXIE HIGHWAY		NAME STREET ADDRESS	L Change L	Addition	
- ST-ZIP NORTH MIAMI FL CIY-ST-ZIP E CIY-ST-ZIP IDelete TITLE CIY-ST-ZIP CIY-ST-ZIP CIY-ST-ZIP E	E	s Leader, diana t.	Delete	NAME	Change	Addition	
IE E INAME STREET ADDRESS -ST-ZIP CITY-ST-ZIP E Delete TITLE Change Ad E NAME ET ADDRESS STREET ADDRESS	* ***			and the second	ار میں اور اور اور <mark>اور اور اور اور اور اور اور اور اور اور </mark>	-	
AE NAME EET ADDRESS STREET ADDRESS	ME IEET ADDRESS		Delete	NAME STREET ADDRESS	Change [Addition	
-ST-7P	IE	· · ·	Delete	NAME	Change] Addition	
	e Ne Eet address		Delete	TITLE NAME STREET ADDRESS	Change] Addition	
	e 1e Eet address		Delete .	TITLE NAME STREET ADDRESS	Change] Addition	

AHachment# HUG, 20, 2003 FIA Dept of State Division of Corperations. P.O. Box 1500 - 801467M 212245 TALLAHASSEE FZ. 32302-1500 I am Enclosing my check for 150.00 For Remington Development Byporation. I would appreciate your rebating the genalty because I have always field on time and I never received the Oregenal report. Thank you for your in Derstanding Veryfraid yours Long Hoteater •