FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 27, 2002 8:00 am **Secretary of State** DOCUMENT # 604177 1. Entity Name 01-27-2002 90149 009 ***150.00 KORNREICH, CASEY, CROSLAND & BRAMNICK, P.A. Principal Place of Business Mailing Address 200 S. BISCAYNE BLVD. 200 S. BISCAYNE BLVD. 910792 SUITE 3600, 1ST UNION FIN CNTR SUITE 3800, 1ST UNION FIN CNTR. MIAMI FL 33131-2338 MIAMI FL 33131-2338 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1448153 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRAMNICK, JAMES S Street Address (P.O. Box Number is Not Acceptable) 200 S BISCAYNE BLVD., STE 3600 MIAMI FL 33131 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable, DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01) VΡ 🔀 Addition TITLE ☐ Delete TITLE ☐ Change KORNREICH, DAVID V. MANDEL, JEFFREY E. NAME NAME STREET ADDRESS 255 S. ORANGE AVENUE 3271 LAKEVIEW OAKS DRIVE STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32801 CITY-ST-ZIP LONGWOOD, FL 32779 ☐ Delete AVP X Addition TITLE SVPD TITI F ☐ Change NAME CROSLAND, JAMES C. NAME HEEKIN, DENISE M. STREET ADDRESS 6301 SW 99TH TERR STREET ADDRESS 1204 ORANGE ISLE CITY-ST-ZIP MIAMI_FL-33156 CITY-ST-ZIP FORT LAUDERDALE, FL 33315 TITLE ☐ Delete TITLE □ Change ▼ Addition AVP rogers, Gordon D NAME RYDER, PAUL T., JR STREET ADDRESS 1609 SE 12TH STREET STREET ADDRESS 7720 SW 183RD TERRACE CITY-ST-ZIP CITY-ST-ZIP ft. Lauderdale fl 33316 MIAMI, FL 33157 SVPD TITLE ☐ Delete ☐ Change ☐ Addition NAME Casey, Michael W. III NAME STREET ADDRESS 16060 SW 77TH COURT STREET ADDRESS CITY-ST-ZIP MIAMI FL 33157 CITY-ST-ZIP TITLE STD Delete ☐ Change TITLE ☐ Addition BRAMNICK, JAMES S NAME NAME STREET ADDRESS 110220 SW 60TH AVE STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME Johnson, Carmen S NAME STREET ADDRESS 6952 SW 149TH TER STREET ADDRESS CITY-ST-ZIP MIAMI FL 33158 CITY-ST-ZIP 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:

SIGNATURE AND TYPED OR P

358-5500 (305)