| 2000 | UNIFORM BUSI | NESS REPO | RT | (UBR) | | | F | ILED | | | |
|--|--|--|------------------------|---|---|--------------------------------------|---|--|------------|------------|--|
| DOCUMENT # 647278 | | | | | | May 05, 2000 8:00 am | | | | | |
| UNION TITLE CORPORATION | | | | | Secretary of State 05-05-2000 90071 042 ***150.00 | | | | | | |
| Principal Plac | e of Business | Mailing Address | | | _ | | 03-03-2000 | 90071 042 | 150. | 00 | |
| | RESS CREEK ROAD | 800 W. CYPRESS CREEK RD. | | | | | | | | | |
| Suite 501 Ft. Lauderdai | LE FL 33309 | SUITE 501 FT. LAUDERDALE FL 33309-2059 | | | | | | | | | |
| US | | US | | , | | | | | | | |
| | lace of Business Cypress Creek Road | 3. Mailing Address 2500 W. Cypress Creek_Road | | | | DO NOT WRITE IN THIS SPACE | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | | | | | | | |
| Suite D- City & State | | Suite D-112 City & State | | | 4. | 4. FEI Number 59-2427262 Applied For | | | | | |
| Ft, Laud Zip | lerdale, Florida | Ft. Lauderdale, Florida Zip Country | | | | | | | | Applicable | |
| 33309-17 | 44 USA | 33309-1744 | USA | <u> </u> | | | Status Desired | Fee Re | | | |
| _ | 6. Name and Address of Current Re | egistered Agent | - | Name | <u> </u> | Name and Ac | Idress of New Reg | listered Agent | | <u> </u> | |
| LACK, EDWARD I 800 W. CYPRESS CREEK ROAD SUITE 501 | | | | Lack, Edward I. Street Address (P.O. Box Number is Not Acceptable) 2700 W. Cypress Creek Road | | | | | | | |
| | AUDERDALE FL 33309 | - | <u>Suite</u> D City | te D-112 | | | | | | | |
| , _ | $-\Delta$ | <u>_</u> | | Ft. Lau | | | | | 309- | 1744 | |
| 8. The above | named entity submits this statement for | he purpose of manging its l | registere | ed office or regis | stered ag | jent, or both, i | n the State of Florid | la. | | | |
| SIGNATURE _ | Siggeture, typed or printed name of regretered agent and | | : Registere | Edwar d Agent signature requ | | | President | 4/25 DATE | /200 | 00 | |
| Tax filing r | oration is eligible to satisfy its Intangible equirement and elects to do so. ria on back) | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta | | | State | Trust | on Campaign Finar Fund Contribution. | | Added t | | |
| 11. | OFFICERS AND DI | | 12. | | A | DDITIONS/CH | IANGES TO OFFIC | ERS AND DIREC | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | LACK, EDWARD I 5888 NW 66TH WAY PARKLAND FL 33067 | Delete | | | | | | | ange | Addition | |
| TITLE | V | Delete | TITL | (| | | | Ch | ange | Addition | |
| NAME Street address City-st-zip | LACK, JONATHAN D. 8500 N.W. 18TH PLACE CORAL SPRINGS FL 33071 | | | E ET ADDRESS - ST- ZIP | | | | | | | |
| TITLE | | Delete | TITLE | | | | | Ch: | ange | Addition | |
| NAME STREET ADDRESS CITY - ST - ZIP | | - | | et address - St - Zip | | | | · | | | |
| TITLE | | Delete | TITLE | | | | | 🔲 Ch | ange | Addition | |
| NAME STREET ADDRESS | | | | ET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | _ | -ST-ZIP | | | | | | | |
| title Name | | 🗋 Delete | TITU NAM | | | | | Ch 🗌 | ange | Addition | |
| STREET ADDRESS CITY - ST - ZIP | | | | ET ADDRESS - ST-ZIP | | | | | | } | |
| TITLE | | Delete | TITLE | | | | | Ch | ange | Addition | |
| | | | NAM | e Et address | | | | | | | |
| STREET ADDRESS CITY - ST - ZIP | _ | | | -ST-ZIP | | | | | | _ / | |
| استداد السيبا | certify that the information supplied with th on this report of supplemental report is tr poration or the receiver or trustee empow or on an attachment with an address, with | us and a found and that m | | turo oball boucht | ho como | logal offect a | e if mede under og | th; that I am an o appears in Block | officiar o | r director | |
| SIGNAT | | NTED NAME OF SIGNING OFFICER | | I. Lack, | Pres | sident | 954-975-8. Date | | one # | | |