CORPO	R BEFORE 8/7/96: \$61.25 (IF DISSOIPROFIT DRATION L REPORT	FLORIDA DEPAR Sandra I Secreta	RTMENT OF STATE 3. Mortham rry of State CORPORATIONS				
CUM	ENT # 74611	0 (6)					
Orporation N UKRANI NC.	ian Business and Pro	FESSIONAL ASSOCIA	TION I		11. 86 11. 8 1811 8 1811 1	<u> </u>	
cipal Place of	f Business	Mailing Address					
50 TAYLOR S' LLYWOOD FL		2850 TAYLOR ST HOLLYWOOD FL 33020 US		3. Date Incorporated or Qualified	3a Date (of Last Repo	ort
				02/28/1979		4/07/199	5
rincipal Plac	e of Business	2a. Mailing Address 26		4. FEI Number 59-2476280			ed For pplicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		8.75 Add Fee Requ	
City & State		City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 M	
Zip	Country	Zip	Country 30	This corporation has liability for Florida Statutes		under s. 19 No	9 032
	9. Name and Address of Curren	29 nt Registered Agent		10. Name and Address of New Re		ont	
NAA POTIAL	DOMAN		81 Name	ddress (P.O. Box Number is Not Accepta	hio)		
Martin, 520 N. C	CEAN BLVD., APT. #10			adress (P.O. Box Number is Not Accepta	Dici/		
	IO DEACH EL MONO		83				
POMPAN	NO BEACH FL 33062						
Pursuant to	the provisions of Sections 617.050	or Fiorida, Such chande was	AUTHORIZED DV THE COLOOR	orporation submits this statement for the pration's board of directors. I hereby accept	FL	85 Zip Co anging its re ment as regi	nistered
Pursuant to office or reg agent. I am SNATURE	the provisions of Sections 617.050 jistered agent, or both, in the State familiar with, and accept the obligational speaking, typed or printed name of registered age OFFICERS AN	of Floridal Such Change was lations of, Section 617.0503, F ent and title if applicable (N ND DIRECTORS	utes, the above-named of authorized by the corpor lorida Statutes. OTE Ragistered Agent signature re	railors board of directors. Tyrines y descrip	DATE	anging its rement as region	gistered stered
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