## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 21, 2003 8:00 am Secretary of State 04-07-2003 90135 032 \*\*\*\*61.25

1. Entity Nar	me	# 751430 CA RATON) CONDI			04-07-20	003 901	35 032 <sup>-</sup>	****61.25	5				
Principal Place of Business 901 E CAMINO REAL BOCA RATON FL 33432 US 2. Principal Place of Business Suite, Apt. #, etc. City & State				Mailing Address 901 E CAMINO REAL BOCA RATON FL 33432 US 3. Mailing Address				A FRANK MARK RIVAL HERK BIARRE SUKT ROSI RIGHT ANGLI BYATT ANGLI ATTU ANG					
				Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
				City & State				4. FEI Number 59-2030377				Applied For   Not Applicable	
Zip Country			Ziţ	Zip Coi				5. Certificate of Status Desired S8.75 Additional Fee Required				1	
	6. Name	and Address of Current	Registere	d Agent				7. Name and Add	iress of New Reg	istered A	gent		7
POLICE CARVA COO							Name						
, too heart-later, concrete.				X BOXX NUSUX		Street Address (P.O. Box Number is Not Acceptable)					]		
WEST-P/	ALM BEACH	FL 33401 FG-		<del>derdale,</del>									
3111 Sterling Rd.				33315 9057 12-6525			City FL Zip Code						1
	audero named enlit	y submits this statement for			registen	I ed office or	r registered	agent, or both, in	the State of Florid	ia. I am fa	miliar with,	and accept	1
SIGNATURE		or printed name of registered agent a	nd title if app	Scable. (NOTI			iure required wh	en reinstating)	Make	DATE	Payable		}
	FILE NOW	: FEE:IS \$61.25		Trust Fund C		-		dded to Fees	Florida				
10.		OFFICERS AND DIR	ECTORS		11.		ΑD	DITIONS/CHANG	ES TO OFFICERS	AND DIRI	ECTORS IN		
TITLE NAME	MEALE D	NREDT		Delete	TITLE		Ass	sist. Sec	cty/Trea	s	☐ Change	Addition	3R2E037 (10/02
STREET ADDRESS	NEALE, ROBERT ESS 901 E. CAMINO REAL, #11B					FT ADDRESS Pr		reston Gilmore					12
CITY-ST-ZIP	BOCA RATON FL 33432					-ST-ZIP		1 E. Camino Real #6B					<u>  8</u>
TITLE NAME	WINBERG, BURTON			□ Delete.	tirus					,	Change	Addition	용
STREET ADORESS		AINO REAL #PHIC		,	STRE	ET ADDRESS	V1	.ce Presi	laent				}
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STREET ADDRESS		WINO REAL, #100				ET ADORESS							
CITY-ST-ZIP	BOCA RAT	ON FL 33432			спу-	ST-ZIP							
title Name	BROOKS, I	MARVIN		Delete	TITLE					[	☐ Change	Addition	
STREET ADDRESS		IINO REAL, #3D			NAME	T ADDRESS					1		
CITY-ST-ZIP		ON FL 33432			CITY-	ST-ZIP			<u>.                                    </u>				
TITLE				☐ Delete	TITLE	· · · · · · · · · · · · · · · · · · ·	·	<del></del>			Change	☐ Addition	
NAME Street Address					NAME STREE	T ADDRESS							
CITY-ST-ZIP		٠,				ST-ZIP						ł	:
2. I hereby c	ertify that the	information supplied with ti	his filing o	loes not qualify for	the exen	notion state	ed in Section	on 119.07(3)(i), Flo	rida Statutes. I fur	ther certify	that the in	formation	٠.

2. 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 cath; that I am an difficer or director of the corporation or the receiver gut-fribes empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

ATUNI KEQUINED

3/21/03 561 -338-0994