2002 UNIFORM BUSINESS REPORT (UBR)

Country Coun	DOCUMENT # 823516 1. Enlity Name No. 10 Percent 10 Per						Secretary of State				
194 E 67TH ST NEW YORK MY 10016 2. Principual Place of Business Surfax, Apt. W, sec. Surfax, Apt. W, sec. Surfax, Apt. W, sec. City & State City & Sta	KOBRAN	ID (CORPORATION)		-							
2. "Integral Place of Business" Suits Appl. 4. decision Suits Appl	134 E 40TH	ST.	134 E 40TH ST						· .		
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Type Country Zip Z	Suite, Apt	<u> </u>	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Solution	City & Stat	е	City & State			4. F	FEI Number 13-5575332				
Name and Address of New Registered Agent Name	Zip	Country	Zip	Cour	ntry	5. Certificate of Status Desired			S8.75 Additional		
UNITED STATES CORPORATION COMPANY 1201 HAYES STREET SUITE 105 TALLAHASSEE FL 32301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE		6. Name and Address of Current	Registered Agent		<u> </u>	71	Name and Address of New Re				
1201 HAYES STREET SUITE 105 TALLAMASSEE FI 32301 6. 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 SUPPLY OF PURPOSE PRODUCT OF THE CONTROLLAR Agent agreement agent in the application of the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE SUPPLY OF PURPOSE PRODUCT OF THE CONTROLLAR Agent agreement agent in the application. SIGNATURE SUPPLY OF THE CONTROLLAR AGENT AGE					Name						
SURTE 108 TALLHASSEE FL 32301 City FL Zip Code City FL Xip Code	17: 'g min'				Street Addre	ss (P.O. E	Box Number is Not Acceptable)				
### The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. ### SIGNATURE Signature	SUITE 10					<u>-</u>					
SIGNATURE STATE Department, typed or prinsic name of ingestanced apport and time it applicable. (NOTE: Registered Apprit supression insolved when riteratures) Detect	TALLAHASSEE FL 32301				City			FL	Zip Code	e	
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### Addition Comment	SIGNATURE .	Signature, byned or printed name of registered agent	t and title if applicable (NO	TE: Begistere	ed Agent signature red	uired when re	einstating)	DATE:	in diğəyili. Kalın Məylər	・計した。 1800年により	
Tax filing requirement and elects to do so. After May 1, 2002. Fee will be \$550.00 Make Check Payable to Department of State Trust Fund Contribution. Added to Fees		P. ACP	1 2 20 14 14 14 14 1 1 1 1 1 1 1 1 1 1 1 1 1			anda viitan i	,				
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SIGNATURE AND TYPET OF RRINT O NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

5. TRINIDAD 1