2002	UNIFOR	M BUSIN	IESS REP	ORT	r (UBI	<b>3</b> )	,	
DOCUMENT # A0000000716					<del> </del>	<del>.</del> . <u>.</u>		
1. Entity Name							FILED	
RUCHO	CKI ENTERPRISES,	LIU.					- 050 21, PH 4: 1	0.
Principal Place of Business -9901 - GOLLINS AVENUE, SUITE 19W BAL HARBOR FL 33154			Mailing Address				OZ SEF 24  SECRETARY OF STAT  FALLAHASSEE, FLOR	i E IDA
%BARRE	lace of Business TBLECTION CF	3. Mailing Address SC BARRET BLECTON, CPA			°A			
Suite, Apt.		Suite, Apt. #, etc.  300 GOLFKIEW DA BAST				,		
1300 GOLFVIEW DR. EAST PEN BLOKE PINES, FL			City & State				4. FEI Number OF 4000000	Applied For
YEH B	LONE PINES		PEMBROKE 1				65-1063060	Not Applicable
- Zip 33 <i>o</i>	Counti	A	Zip 3076		untry 50		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Add	iress of Current Re	gistered Agent		1		7. Name and Address of New Registered	Agent
BLECKER, BARRET CPA					Name Street Address (P.O. Box Number is Not Acceptable) 1300 GOLFVIEW DA EAS			
2699 SO. BAYSHORE DRIVE					7300	UUL	Priew Dr. ens	
MIAMI FL 33133					City	<u> </u>		Zip Code
							e Pines FI	- 33026
	named entity submits	this statement for the	e purpose of changing	its regist	ered office of	registere	ed agent, or both, in the State of Florida.	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.							DATE	
9. Capital Contributions as Shown on record. \$5,000,000.00 in FLORIDA to date					tributions L	1.000	MAKE CHECK PAYABI	
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.								
DOCUMENT /	GE	NERAL PARTNER IN	FORMATION	1	3.	class	ADDRESS CHANGES ON BLECKER, CPA	ILY
NAME	RUCHOCKI MANAGEMENT, INC.			s	STREET ADDRESS 1300		GOLFVIEN DIL BAST	
STREET ADDRESS CITY-ST-ZIP	9801 COLLINS AVENUE, SUITE 19 BAL HARBOR FL 33154		Γ <b>W</b>		ITY-ST-ZIP		BROKE PINES, FL 3302	6
DOCUMENT # NAME		•		s	TREET ADDRESS			
STREET ADDRESS							<del></del>	
CITY-ST-ZIP				C	IFY-ST-ZIP		<del>- 30000805</del> 3	77-4
DOCUMENT # NAME	. <del>.</del>	후 기술에 발표하고 있다. 기술	·	- :=:=:s	TREET ADDRESS	·	-09/26/021 ****926.25	01044020 ****926.25
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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Regina Matt Levin Pres OF CORP. GENPIN 954-4318720

<sup>14.</sup> 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes