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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #F0100003583 EFS I, NRC. O3 APR IS AM 8: 23 SECRETARY OF STATE MALAHASSEE, FLORIDA 18 FOLIXED SUITE 100 SUITE 200-3 SUITE 100		IIFURM BUSINES									
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S. Settings of Status Desired Sections of S	City & State		City & State				25 4754050				
Name Sireer Address (P.O. Box Number is Not Acceptable) At The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligation of registered agent. Interpolation	Zip Country Zip			Coun	try						
SCREAT PARK AVENUE TALLAHASSER, FL 32301 Dity FL Zp Code A. 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. I am familiar with, and accepts the obligations of registered agent. SIGNATURE SIG	Name							dress of New Reg	stered Agent		
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NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, 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.	NAME \	WURZEL, STEPHEN B 4432 CALLADA PLACE	Delene	NAM STRE	E Et address				W/W	Change	Addition
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SIGNATURE: Gregory M. Apke 4/1903 (281) 565.7905 SIGNATURE: Gregory M. Apke 4/1903 (281) 565.7905 Outsine Prome 8											