Pricepid Place of Business 2 NULLWOOD CT. HAMPTOR, NY 11937 DO NOT WRITE IN THIS SPACE ULUWING Address 2 NULLWOOD CT. HAMPTOR, NY 11937 DO NOT WRITE IN THIS SPACE ULUWING Address of Current Registered Agent ADD REVIS, LESLE 37D COLONY LANE FT PIERCE, FL 34962 R. The above rande defines of Current Registered Agent ADDREVS, LESLE 37D COLONY LANE TT PIERCE, FL 34962 R. The above rande defines of Current Registered Agent ADDREVS, LESLE 37D COLONY LANE TT PIERCE, FL 34962 R. The above rande defines of Current Registered Agent ADDREVS, LESLE 37D COLONY LANE TT PIERCE, FL 34962 R. The above rande defines of Current Registered Agent ADDREVS, LESLE 37D COLONY LANE TT PIERCE, FL 34962 R. The above rande defines of Current Registered Agent ADDREVS, LESLE 37D COLONY LANE THE NOW!! FEE IS \$150.00 R. Ending Corresponder SCIANTURE UD00002666661 U000002666661 U00000266661 U0000000 U00002666661 U000000 U0000266661 U0	1. Entity Nam	MENT # F020000	AL REPORT		Mar 17, 2005 08:00 AN Secretary of State		
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ANDREWS, LESLIE	C	DO NOT WRIT	E IN THIS SPA	ACE	02122005 No C 4. FEI Number 54-2076493	hg-P CR2E034 (10/03)	
the obligations of registered agent. SIGNATURE Signalue, lyed or private dream of registered agent and the registration Title NAME VAX, ADRIENNE STRET ADDRESS UVLL/WOOD CT, CITY-ST-2P HAMPTON, NY 11937 TITLE NAME VAX, ADRIENNE STRET ADDRESS UVLL/WOOD CT, CITY-ST-2P HAMPTON, NY 11937 TITLE NAME VAX, ADRIENNE STRET ADDRESS UVLL/WOOD CT, CITY-ST-2P HAMPTON, NY 11937 TITLE NAME VAX, ADRIENNE STRET ADDRESS CITY-ST-2P HAMPTON, NY 11937 TITLE NAME STRET ADDRESS CITY-ST-2P HAMPTON, NY 11937 TITLE STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRES STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRESS CITY-ST-2P HAMPTON STRET ADDRES STRET ADDRES	37D COLC	S, LESLIE	ent Registered Agent	· · · · · · · · · · · · · · · · · · ·			· •
TITLE CPT NAME ANDREWS, LESLIE STRET ADDRESS LUIDWOOD CT. HAMPTON, NY 11937 TITLE VCVP WAX, ADRIENNE STRET ADDRESS UNILDWOOD CT. HAMPTON, NY 11937 TITLE S WAX, ADRIENNE STRET ADDRESS STRET	the obligat SIGNATURE_	Signature, typed or printed name of registered a E NOW!!! FEE IS \$150.00	Sent and tills if applicable (NOTE Report 9. Election Campaign Fin	ancing\$5.	when reinstating) 00 May Be		ept
TITLE S NAME WAX, ADRIENNE 2 WILDWOOD CT. HAMPTON, NY 11937 TITLE NAME STRET ADDRESS CITY-ST-ZIP TITLE NAME STRET ADDRESS CITY-ST-ZIP TITLE NAME STRET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	CPT ANDREWS, LESLIE 2 WILDWOOD CT. HAMPTON, NY 11937 VCVP WAX, ADRIENNE 2 WILDWOOD CT.				00000266661 7/05-80041-004 150.00	
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12. I hereby certify that the information supplied with this filing does not quality 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 oath; that I am an officer or director of the corporation or the receiver of strutche 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 STREET ADDRESS CITY - ST - ZIP	sertify that the information supplied void the supplied of the supplicit of supplemental reports of supplementations and supplementations are supplementations and supplementations are supplementations a	vith this filing does not qualify for the ex rt is true and accurate and that my sign	emption stated in Sec ature shall have the s	ction 119.07(3)(i), Florida (ame legal effect as if mac	Statutes. I further certify that the information de under oath, that I am an officer or directo	