DOCUMENT # F0700005094				Jı	FILED Jul 14, 2008 08:00 AM Secretary of State	
Principal Place of Business 777 SUNRISE HIGHWAY, SUITE 300 LYNBROOK, NY 11563		Mailing Address 777 SUNRISE HIGHWAY, SU LYNBROOK, NY 11563	IITE 300		07092008 No Chg-P CR2E034 (11/05)   4. FEI Number Applied For   11-3473486 Not Applicable   5. Certificate of Status Desired \$8.75 Additional Fee Required	
D		re in this sp				
	6. Name and Address of Cur IER, JAN AYSHORE DRIVE, UNIT 25 I GROVE, FL 33133				NOT WRITE THIS SPACE	
the obligat SIGNATURE_	ions of registered agent.	agent and title if applicable. (NOTE: Reg 0 9. Election Campaign F	istered Agent signature required		th, in the State of Fiorida. I am familiar with, and acception of the state of Fiorida. I am familiar with, and acception of the state	
10. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	OFFICERS CP STUMACHER, JAN 777 SUNRISE HIGHWAY, S LYNBROOK, NY 11563 DV KLANG, PEGGY 777 SUNRISE HIGHWAY, S LYNBROOK, NY 11563			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-S1-2iP TITLE NAME STREET ADDRESS CITY-ST-2iP TITLE NAME STREET ADDRESS				IN <sup>-</sup>	THIS SPACE	
CITY-ST-ZIP	certify that the information supplied on this report of supplemental rep poration or the receiver or trustee or on an attachment with an addr	t with this filing does not qualify for the port is true and accurate and that my si empowered to execute this report as re pes, with all other like empowered.	e exemptions containec gnature shall have the s equired by Chapter 607	l in Chapter 11 same legal effec , Florida Statute	9. Florida Statutes. I further certify that the information ct as if made under oath; that I am an officer or directo as; and that my name appears in Block 10 or Block 11	

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