2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F94000001516 **DOCUMENT #**

1. Entity Name

FLORIDA DELAWARE CORPORATION



FILED Feb 14, 2003 8:00 am Secretary of State

02-14-2003 90198 027 ***158.75

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30 ISLAND ROAD PALE SEACH FL 3080 PALE SEACH FL 308				GO WE THO					
Subs, Apr. 4, etc. Check Here IF MAKING CHANGES Subs, Apr. 4, etc. Check Here IF MAKING CHANGES Subs, Apr. 4, etc. Check Here IF MAKING CHANGES City & State City & State Check Here IF MAKING CHANGES Zip Country Zip Country S. Certificate of Status Desired Making Address of Current Registered Agent P. Name and Address of New Registered Agent P. Name and Address	Principal Place of Business 330 ISLAND ROAD PALM BEACH FL 33480		330 ISLAND ROAD						
City & State City & State City & State City & State Country 2 D Country 5 Country 6 Country 7 Name and Address of New Registered Agent 8 Not Acceptables 9 Name Agent New	2. Principal Pla	ce of Business	3. Mailing Address			BBiit PBiit Beitt Burn aan	[] ([84) Birêt (14)		
City & State Country Z.p	Suite, Apt. #	, etc.	Suite, Apt. #, etc.						
S. Name and Address of Current Registered Agent FUETY, FRANCES A S30 ISLAND ROAD PALM BEACH FL 33480 City FL Zip Code City City City City City FL Zip Code City	City & State		City & State		4. FEI Number 51-029		Not A	Applicable	
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NUETY, FRANCES A Street Address (PO. Box Number is Not Acceptable)		and Address of Current	Registered Agent		7. Name and Address of	New Registered A	gent		
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PALM BEACH FL 33480 8. The above named entity submits this statement for the purpose of changing its registered eigent, or both, in the State of Florida. I am familiar with, and accept they doil gathers of registered agent. SIGNATURE ### STILLE NOW!!! FEE IS \$150.00 ### Added to Florida Department of State OFFICES AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICES AND DIRECTORS OTHER ADDRESS OTH STREET ADDRESS OTH S				Street Addres	is (P.O. Box Number is Not Acc	eptable)			
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I nereby 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 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.

SIGNATURE

President

2/11/03

(561) 655-6760

Daytime Phone # Date