20 UN	003 FOR PROI	FIT C ESS	ORPOR REPOR	AT T (!	ION UBR)			Apr 18, 2 Secreta	LEL 2003	) 8:(	)0 an	n
DOCU	MENT # G108	94						Secreta	ry of	f St	ate	
1. Entity Name WILLIAM J. BOOTH, P.A.								04-18-2003 90				
Principal Plac 701 E COMMI STE 100	ce of Business ERCIAL BLVD		) Address Commercial BLVD 0	1								
FT LAUDERDALE FL 33334 US			FT. LAUDERDALE FL 33334 US									
			3. Mailing Address									
Suite, Apt	. #, etc.	Suite	Suite, Apt. #, etc.									
City & Sta	te	City	City & State				4. FEI Number 59-0224268 Applied Fo				•	]
Zip	Country	Zip		Cour	itry		5. Cer	ificate of Status Desired		.75 Add		1
	6. Name and Address of Curre	nt Registered	d Agent		T		7. Nan	e and Address of New Regis		Require	d 	-
··· · · · ·		-	.ر به در		Name							1
Booth, William J. 701 E Commercial BLVD					Street Add	ress (P.	O. Box I	Number is Not Acceptable)				
STE 100 FT. LAUDI	ERDALE FL 33334				City EI Zip C				Zip Code		_	
<b>a T</b>					L				FL			
the obligation	e named entity submits this statement tions of registered agent.	for the purpo	se of changing its	register	ed onice of re	gistered	d agent,	or both, in the State of Pionoa	i. Tam tami	iar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered age	ent and title if appli	cable. (NOTE	: Registere	d Agent signature r	equired w	hen reinsta	ting)	DATE			
Afte	FILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 k Payable to Florida Department							9. Election Campaign Financ Trust Fund Contribution.	ing		<b>0</b> May Be I to Fees	
10.	OFFICERS AN	ID DIRECTOR	IS	11.			ADDIT	IONS/CHANGES TO OFFICE	RS AND DIF	RECTOR	S IN 11	1.
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BOOTH, WILLIAM J 7501 N.W. 6TH STREET PLANTATION FL	je J	Delete							Change	Addition	2034 (10/00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete							Change	Addition	
TITLE	ار میں برج ہو جو میں میں اور		Delete	TITLE NAM	E + -			يېونۍ د ه سې د د م م		Change	Addition	
STREET ADDRESS CITY-ST-ZIP	le la				et address - St- Zip							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete							Change	Addition	
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CITY-ST-ZIP					-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP			Delete							Change	Addition	
indicated of the cor	certify that the information supplied we to on this report or supplemental report poration or the receiver or trustee em , or on an attachment with an address FURE:	is true and a powered to e s, with all othe	ccurate and that m xecute this report a r like empowered.	y signat is requir	ure shall have ed by Chapte	e the sa	me lega	l effect as if made under oath:	that Lam a pears in Blo 3 95	n officer i	or director	
	alanti arte Arra Kirrea U		S. SIGNING OFFICER C					- Uale I	Dayume	n none #	•	1