2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J08651 1. Entity Name CORMAK CORPORATION						SECRETARY OF STATE DIVISION OF CORPORATIONS' 03 MAY 21 PM 1: 10				
Principal Plac 11589 FIRST S PALM BEACH		Mailing Address 11589 FIRST ST. PALM BEACH GARDENS								
2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address			r (daring bent darion salle diene desig	f fist tisti asti	61841 1 1861 1	LIBRE BEGER FOOL	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State	City & State			59-2813403			oplied For ot Applicable	e
Zip	Country	Zip	Coun	lry				.75 Additional Required		
	6. Name and Address of Curre	nt Registered Agent				7. Name and Address of New Registered Agent				
CODIATY	LANA			Name	,					-
CORIATY, LAILA 11589 FIRST STREET				Street Ac	idress (P.O	Box Number is Not Acceptable)				
PALM BEACH GARDENS FL 33410									•	
				City			FL	Zip Cod	е	7
	named entity submits this statement ions of registered agent.	for the purpose of changing it	s registere	d office or	registered	agent, or both, in the State of Flori	da. I am fam	iliar with,	and accept	1
SIGNATURE _	Signature, typed or printed name of registered agr	ent and title if applicable. (NO	TE: Registered	Agent signatu	re required whe	n reinstäting)	DATE	, -	<u>:</u> -	
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0 Payable to Florida Department		 _			Election Campaign Fina Trust Fund Contribution.			O May Be 1 to Fees	
10.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Delete CORIATY, LAILA 11589 FIRST STREET PALM BCH GARDENS FL 33410		, name strei	TITLE NAME STREET ADDRESS CITY-ST-ZIP		5000202 05/29/0301062	≥53 : 5 003	Change 13	Addition	CR2E034 (10/02)
TITLE NAME STREET AODRESS CITY-ST-ZIP	☐ Delete		NAME STREE	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,] Change	Addition	SRS
TITLE NAME STREET ADDRESS CITY-ST-ZIP		a						Change -	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete		NAME STREE	TITLE NAME STREET ADDRESS CITY-ST-2IP				Change .	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		- 1				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	CITY-:	T ADORESS ST-ZIP		:	_	Change	Addition	
OF BIRT COLD	ertify that the information supplied w on this report or supplemental report obration or the raceiver or trustee em or on an attachment with an address	powered to execute this tebolt	as require	nption state ire shall ha id by Chap	d in Section ve the samulter 607, Flo	n 119.07(3)(i), Florida Statutes, I fo e legal effect as if made under oai orida Statutes; and that my name a	urther certify this that I am a ppears in Blo	hat the in in officer o ock 10 or	formation or director Block 11 if	

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF SHAWED OF OF SHAWED

Wachovia Bank, N.A. PG.A. Financial Center FLG238 4440 PGA Boulevard, Suite 101 Palm Beach Gardens, FL 33410

Tel 561 838-5500 Fax 561 838-5398



WACHOVIA

5/16/03

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS PO. BOX 6327 TAllAhASSEE, FL 32314

Subject: CORMAK CORPORATION

De bit Memo # 33322-6 Document # 508651.

I did Not Receive the Notice
that advised me of A Returned
Check April your intent to dissolve in
to days. Therefore, I'm requesting a
Warren of the Reinstatement fee And
Penalty.

Lil Cof

LAILA CORIATY
PRESIDENT OF CORMAN COPP.

CASher's Check Filing 15000 Rotified CK1500