	MENT # J28293	NESS REPUR	KI (UBK)	FILED Jan 19, 2000 8:00 a	
CITY CAE	B, INC.			Secretary of State 01-19-2000 90176 040 ***150.00	
Principal Place		Mailing Address 2826 GREEN STREET			
ARIANNA FL 3		MARIANNA FL 32448-4421			
l. Principal Pla	ace of Business	3. Mailing Address			
Suite, Apt. #	ŧ, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number 59-2755293 Applied For Not Applied	
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current F	egistered Agent		7. Name and Address of New Registered Agent	
			Name		
HAGAN, ARTHUR J. 2826 GREEN STREET MARIAÑNA FL 32446			Street Address	s (P.O. Box Number is Not Acceptable)	
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	,		City	Zip Code	
	ation is eligible to satisfy its Intangible equirement and elects to do so. a on back)		FEE IS \$150.00 Fee will be \$550.00 to Department of St		
1.	OFFICERS AND D	DIRECTORS	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
AME	PVS HAGAN, ARTHUR J. 2826 GREEN STREET MARIANNA FL 32446	□ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	☐ Change ☐ Addil	
TLE AME TREET ADDRESS	MAI WY WAY I E CETTO	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addit	
ITY-ST-ZIP		. Delete	CITY-ST-ZIP TITLE	☐ Change ☐ Addit	
AME Treet address Ity-St-ZIP	to the second se	~ · ·	NAME STREET ADDRESS CITY-ST-ZIP	•	
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ITY-ST-ZIP ITLE AME TREET ADDRESS		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addit	
ITY-ST-ZIP 3. I hereby ce indicated cof the corp	on this report or supplemental report is coration or the receiver or trustee empore or an attachment with an address, where	true and accurate and that my vered to execute this report as	city-st-zip ne exemption stated in signature shall have the required by Chapter 66	Section 119.07(3)(i), Florida Statutes. I further certify that the information the same legal effect as if made under oath; that I am an officer or directors, Florida Statutes; and that my name appears in Block 11 or Block 12	