Size   Country   Size   Country   Size   S	1. Entity Name	-21127	, ,		
Principal Place of Business  Mailing Address  Mailing Add		33116		FILED	
2. Principal Place of Business  2. Principal Place of Business  4905 LAGUNA VISTA DRIVE  4905 LAGUNA VISTA DRIVE  4905 LAGUNA VISTA DRIVE  Suite, Apr. 4, etc.  City & State  MELBOURNE, FLORIDA  Courty  2p  Courty  2p  Courty  2p  Courty  2p  Courty  2p  Courty  32934  USA  8. Name and Address of Current Registered Agent  Name  RINTE, ROBERT  4905 LAGUNA VISTA DRIVE  City & State  Name  ROBERT  ROBERT  4905 LAGUNA VISTA DRIVE  Billion Address of Current Registered Agent  Name  Street Address (PO. Box Number is No: Acceptable)  City & FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered differ or registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered differ or registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida  8. The Address (PO. Box Number is No: Acceptable)  OIT State Address (PO. Box Number is No: Acceptable)  OIT State Address (PO. Box Number is No: Acceptable)  10. Election Campaign Financing  10. Election Campaign Financin	OWER THO CHUD DELO	T, INC.		INVISION OF CORPORATIONS	
Principal Place of Business				01 JUN 11 AM 11:52	
4905 LAGUNA VISTA DRIVE Suite, Apt. #, etc. City & State #ELBOURNE, FLORIDA  City & State #ELBOURNE, FLORIDA  Applied For Successful Spansor Spans	Principal Place of Business	Mailing Address			
4905 LAGUNA VISTA DRIVE Suite, Apt. #, etc. City & State #ELBOURNE, FLORIDA  City & State #ELBOURNE, FLORIDA  Applied For Successful Spansor Spans					
4905 LAGUNA VISTA DRIVE Suite, Apt. #, etc.  City & State  MELBOURNE, FLORIDA  MELBOURNE, FLORIDA  MELBOURNE, FLORIDA  Sayayar, State  MELBOURNE, FLORIDA  Sireet Address of New Registered Agent  Name  Street Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Sireet Address (PO. Box Number is Not Acceptable)  City  FL  Zip Code  Added to Fees  Sireet Address (PO. Box Number is Not Acceptable)  10. Election Campaign Financing  Sireet					
Suite, Apt. #, etc.  Suite, Ap	2. Principal Place of Business	3. Mailing Address	VICTA DI	DIVERSE TENEMENT 00-1	$D_{\perp}$
City & State  MELBOURNE, FLORIDA  City & State  MELBOURNE, FLORIDA  Country  32934  Country  32934  Country  32934  City State  Name  Street Address of New Registered Agent  Name  RUNTE, ROBERT  4905 LAGUNA VISTA DRIVE  MELBOURNE, FLORIDA 32934  City  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE  ROBERT RUNTE,  Signature, typest or printed name of migisteed agent and titled is applicable.  PRESIDENT  Signature, typest or printed name of migisteed agent and titled is applicable.  ROWIT Registered Agent understating.  PRESIDENT  Signature, typest or printed name of migisteed agent and titled is applicable.  ROBERT RUNTE,  Signature and elects to do so.  KI  Make Check Papartment of State  Title: NOWIII, FEE 18 \$150.00  Added to Fees  Title: NOWIII, FEE 18 \$150.00  Trust Fund Contribution.  Change   Addition  Trust Fund Contribution.  Change   Addition  SIREET ADDRESS  DOWN SIREET ADDRESS  CITY-ST-2IP  ROBERT  RUNTE,			A VISIA DI	DO NOT WRITE IN THIS SPACE .	rel
MELBOURNE, FLORIDA  MELBOU	City & State	City & State		7.7	. 25 i For
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  8. Signature RÖBERT RUNTE, PRESIDENT Signature, typed or primed name of registered agent and late if applicable in the state of Florida.  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution. Added to Fees will be \$55.00 May Be After MW 1:2001; Fee will be \$55.00 May Change Trust Fund Contribution. Added to Fees Will be \$50.00 Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 III.E MAME  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 III.E MAME  13. THE ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 11 III.E MAME  14. THE ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 11 III.E MAME  15. OFFICERS AND DIRECTORS IN 12 Addition MAME  16. REGENTAL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 III.E MAME  17. Name and Address of New Registered Agent  18. City States Address (PO. Box Number is Not Acceptable)  18. The Address (PO. Box Number is Not Acceptable)  19. City States Address (PO. Box Number is Not Acceptable)  10. Election Campaign Financing Trust Fund Contribution. Added to Fees will be \$55.00 May Be	MELBOURNE, FLORIDA	MELBOURNE,		65-0564076 Not App	olicable
RUNTE, ROBERT 4905 LAGUNA VISTA DRIVE MELBOURNE, FLORIDA 32934  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  ROBERT RUNTE, Signature, typed or protect name of registered agent and title II applicable.  PRESIDENT  Signature, typed or protect name of registered agent and title II applicable.  PRESIDENT  Signature registered agent, or both, in the State of Florida.  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so.  (See criteria on back)  DATE  10. Election Campaign Financing Trust Fund Contribution.  Added to Fees  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN III  ITIE  NAME  SIREET ADDRESS  CITY-ST-ZIP  DATE  Addition  AMA  SIREET ADDRESS  CITY-ST-ZIP  MELBOURNE, FLORIDA 32934  TITE  NAME  SIREET ADDRESS  CITY-ST-ZIP  MELBOURNE, FLORIDA 32934  TITE  NAME  SIREET ADDRESS  CITY-ST-ZIP  MELBOURNE, FLORIDA 32934  TITE  Addition	32934 USA	32934	1 *		al
RUNTE, ROBERT 4905 LAGUNA VISTA DRIVE MELBOURNE, FLORIDA 32934  City  FL  Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE ROBERT RUNTE, Signature Sig	6. Name and Address of Cu	urrent Registered Agent	Name	7. Name and Address of New Registered Agent	
#####717.50  **TITLE NAME  ******717.50  **TITLE NAME  ******717.50  **TITLE NAME  ******717.50  **TITLE NAME  ******717.50  *******717.50  *******717.50  *******717.50  *******717.50  ********717.50  *******717.50  *******717.50  *******717.50  *******717.50  *******717.50  ***********************************	RUNTE, ROBERT			ddress (P.O. Rox Number is Not Acceptable)	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE ROBERT RUNTE, PRESIDENT Signature, typed or printed name of registered agent and talled applicable. (NOTE Registered Agent Signature required wire resistating)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE NAME STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE ROBERT STREET ADDRESS CITY-ST-ZIP POMPANO BEACH STREET ADDRESS CITY-ST-ZIP POMPANO BEACH STREET ADDRESS CITY-ST-ZIP POMPANO BEACH STREET ADDRESS	4905 Laguna Vista Dri	IVE	0.70017.0	alless (v.s. sex values)	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE ROBERT RUNTE, PRESIDENT Signature, typed or printed name of registered agent and title il applicable.  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees  Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE  NAME STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  RUNTE, ROBERT  RUNTE, ROBERT  RUNTE, ROBERT  WELBOURNE, FLORIDA 32934  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  RUNTE, ROBERT  WELBOURNE, FLORIDA 32934  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  RUNTE, ROBERT  WELBOURNE, FLORIDA 32934  TITLE  RUNTE, ROBERT  MELBOURNE, FLORIDA 32934  TITLE  RUNTE, ROBERT  MELBOURNE, FLORIDA 32934  TITLE  RUNTE, ROBERT  NAME STREET ADDRESS CITY-ST-ZIP  RUNTE, ROBERT  MELBOURNE, FLORIDA 32934  TITLE  RUNTE, ROBERT  MELBOURNE, FLORIDA 32934  TITLE  RUNTE, ROBERT  RUNTE, ROB	MELBOURNE, FLORIDA 32	2934	City	<b>□</b>	
SIGNATURE ROBERT RUNTE, PRESIDENT Signature, typed or printed name of registered agent and title II applicable.  9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II II  ITTLE NAME STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062  TITLE NAME RUNTE, ROBERT RUNTE, ROBERT STREET ADDRESS CITY-ST-ZIP ROBERT RUNTE, ROBERT RUNTE, ROBERT STREET ADDRESS CITY-ST-ZIP ROBERT RUNTE, ROBERT RUNTE, ROBERT ROBER				r <sub>L</sub>	
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NAME STREET ADDRESS CITY-ST-ZIP NAME NAME NAME NAME NAME NAME NAME NAME	Tax filing requirement and elects to do so.	After MAY 1, 20	01_Fee will be \$5	10. Election Campaign Financing \$5.00 Ma	
STREET ADDRESS CITY-ST-ZIP POMPANO BEACH, FL 33062 CITY-ST-ZIP POMPANO BEACH, FL 33062 TITLE V XX Delete TITLE NAME RUNTE, ROBERT STREET ADDRESS CITY-ST-ZIP MELBOURNE, FLORIDA 32934 TITLE NAME STREET ADDRESS CITY-ST-ZIP MELBOURNE, FLORIDA 32934 TITLE PD XX Change Addition Addition NAME STREET ADDRESS CITY-ST-ZIP	Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS	After MAY 1, 20 Make Check Payal AND DIRECTORS	001_Fee will be \$5 ble to Department	10. Election Campaign Financing \$5.00 Ma 50.00 Trust Fund Contribution. Added to Fe	ees
NAME STREET ADDRESS 4905 LAGUNA VISTA DRIVE CITY-ST-ZIP  TITLE  RUNTE, ROBERT STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  TITLE  PD  XIX Change Addition	Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS  TITLE PD  MORAN, WILLIAM	After MAY 1, 20 Make Check Payal  AND DIRECTORS  XXX Delete	101 Fee will be \$5 ble to Department 12. TITLE NAME	10. Election Campaign Financing \$5.00 Ma 50.00 Trust Fund Contribution. Added to Fe ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	ees -
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CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  13. I hereby 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	Tax filing requirement and elects to do so. (See criteria on back)  11. OFFICERS  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	After MAY 1, 20 Make Check Payal A AND DIRECTORS  XX Delete A TREET 33062  XX Delete A DRIVE DRIDA 32934  □ Delete □ Delete	D1 Fee will be: \$5 ble to Department  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS	10. Election Campaign Financing Trust Fund Contribution.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1  Change   //  Change   //  Change   //  Change   //  PD   XIX Change   //  PD   Change   //	Addition  Addition  Addition  Addition

SIGNATURE: ROBERT RUNTE, PRESIDENT 04/19/01 321-253-0801