## FILED Apr 28, 2003 8:00 am Secretary of State

	UNIFORM BUSINESS REPORT (UBR)							3 <b>ecretary of State</b> 04-28-2003 91457 044 ***150.00				
1. Entity Nan	MENT	#J37558	,				04-28-	2003 9143	57 U44 ***** :			
Principal Place 1451-A S. M MIAMI, FL 3	IAMI AVE:	3	Mailing Address 1451 A.S. MIAMI AVE. NIAMI, FL 33138					·		,		
2. Principal F 1333 S Suite, Apt.	Miam:	ess i Ave #302	3. Mailing Address 1333 S. Mia Suite, Apt. #, etc.	mi Ave	#302		<b>Ж</b> СНЕСК НЕ					
Cily & Stat			City & State Miami. FL			4. FEII	Number <b>59-27234</b>	68	<b>├</b>	applied For lot Applicable	-	
Zip 33130		Country	Zip 33130	Country		5. Cert	ificate of Status Desire		\$8.75 Ac	ditional		
· · · · · · · · · · · · · · · · · · ·	5. Name	and Address of Current	Registered Agent	Na	me	7. Nam	e and Address of Ne	w Registered	Agent		<b>1</b>	
TANNHAUSER, MICHAEL 7512 MUTINY AVE. N. BAY VILLLAGE, FL 33141					Name Street Address (P.O. Box Number is Not Acceptable)					,		
				Cit	y			F	Zip Co	de .		
	named entit		or the purpose of changing its	s registered off	ice or register	ed agent,	or both, in the State of	f Florida. I ar	n familiar with	, and accept		
SIGNATURE	Sampling bright	or printed name of registered agent	and title if wordinable (NEW	TE: Registered Agent	t when strong restricts.	Luban minera	rian)	DATE				
Afte	FILE NOW! "May 1, 20	!  FEE IS \$150.00 33 Fee will be \$550.00 5 Florida Department				· · · · ·	Election Campaign Trust Fund Contrib	n Financing	\$5.	DO May Be		
10.	envertier marketeres en much	OFFIGER AND				ſ	must i una Comme		- A00€	d to Fees	l	
TITLE NAME	DP	OFFICERS AND	DIRECTORS	13.		ADDIT	IONS/CHANGES TO		ND DIRECTOR	RS IN 11		
STREET ADDRESS City-st-2P	7512 MUT	ISER, MICHAEL	DIRECTORS Delete	11.  ITILE NAME STREET ADD		ADDIT				RS IN 11	F034 (10/02)	
	7512 MUT	ISER, MICHAEL INY AVE.		TITLE NAME STREET ADD	RESS	ADDIT			ND DIRECTOR	RS IN 11	CR2En34 (10/02)	
CITY-ST-2P  TITLE NAME STREET ADDRESS CITY-ST-2P  TITLE NAME STREET ADDRESS	7512 MUT	ISER, MICHAEL INY AVE.	□ Delete	TITLE NAME STREET ADD CITY-ST-2/I TITLE NAME STREET ADD CITY-ST-2/I TITLE NAME STREET ADD	RESS	ADDIT			ND DIRECTOR	RS IN 11	CR2E034 (10/02)	
CITY-ST-2P  1ITLE NAME STREET ADDRESS CITY-ST-2P  TITLE NAME	7512 MUT	ISER, MICHAEL INY AVE.	□ Delete □ Delete	TITLE NAME STREET ADD CITY-ST-2/I TITLE NAME STREET ADD CITY-ST-2/II TITLE NAME	PRESS	ADDIT			D DIRECTOI	Addition  Addition	CR2E034 (10/02)	
CITY-ST-2P  1ITLE NAME STREET ADDRESS CITY-ST-2IP  1ITLE NAME STREET ADDRESS CITY-ST-ZIP  1ITLE NAME STREET ADDRESS STREET ADDRESS	7512 MUT	ISER, MICHAEL INY AVE.	☐ Delete ☐ Delete ☐ Delete ☐ Delete	TITLE NAME STREET ADD CITY-ST-2II TITLE NAME STREET ADD	RESS	ADDIT			D DIRECTOI	Addition  Addition	CB2FG34 (10/02)	
CITY-ST-2P  11TLE NAME STREET ADDRESS	7512 MUT	ISER, MICHAEL INY AVE.	Delete Delete Delete Delete	TITLE NAME STREET ADD CITY-ST-2H TITLE NAME STREET ADD	RESS	ADDIT			D DIRECTOI  Change  Change	Addition  Addition  Addition	CB2En24 (10/02)	

12. 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 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4(1703 (201)374-8-73