Daytime Phone #

	UNIFORM BUSI MENT # K47376	BR)	FILED Feb 07, 2001 8:00 am							
1. Entity Nam			•		S	o2-07-2001 9	ry of	Sta	te	
Principal Place of Business 1200 N FEDERAL HWY STE 111 BOCA RATON FL 33432 US		Mailing Address 1200 N FEDERAL HWY STE 111 BOCA RATON FL 33432 US			 			.	a e e e e e e e e e e e e e e e e e e e	
2. Principal Place of Business 6550 N. Federal Hwy Suite, Apt. #, etc.		3. Mailing Address 6550 N. Federal Highway								
330		Suite, Apt. #, etc			DO NOT WRITE IN THIS SPACE					
City & State Ft. Lauderdale, FL		City & State Ft. Lauderdale, FL		4	. FEI Number	65-0085309		Applied For Not Applicable		
Zip - 33308	Country Broward	Zip 33308	Country Broward	1 5	. Certificate of S	Status Desired		75 Addit Required] .
	6. Name and Address of Current R	egistered Agent	Non			dress of New Reg	istered Agent]- `
CLINTON, DONALD J. 1200 N FEDERAL HWY				inton, D	onald J. Box Number is	Not Acceptable)				-
STE			Suite 33		derar III,	giway				1
ВОС	A RATON FL 33432	·			t. Lauderdale FL Zip Code 33308					1
8. The above	named entity submits this statement for the stat			e or registered		n the State of Florid	//3//O/ DATE	1		
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State			10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees					
11.	OFFICERS AND D		12.	. , , , , , , , , , , , , , , , , , , ,	ADDITIONS/CH	ANGES TO OFFICI				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CLINTON, DONALD J. 1200 N FEDERAL HWY, STE 111 BOCA RATON FL	□ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP			al Highway e, FL 333	, Suite	_	Addition	E034 (10/00)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delate	TITLE NAME STREET ADDRE CITY-ST-ZIP	ess			c	thange	☐ Addition	CR2E00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADORE CITY-ST-ZIP	ss			c	hange	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME Street Addre City-St-Zip	ss			□ c	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP				<u></u> ci		☐ Addition	
of the corp		ue and accurate and that my ered to execute this report a:	signature sha s required by Clinton	all have the same Chapter 607, Flo	e legal effect as prida Statutes; a	if made under oath	n that I am an	officer or k 11 or B	r director	