2000	UNIFORM BUSI	NESS REPO	DRT	(UBR	l)		-	DII D	n		
DOCUMENT # K88881 1. Entity Name						FILED May 16, 2000 8:00 am Secretary of State					
LLOYD PRESCOTT ASSOCIATES, INC.						Secretary of State 05-16-2000 90567 031 ***150.00					
Principal Plac	e of Business	Mailing Address					05-16-20	00 90567 (31 ***15	0.00	
4902 EISENHOV		4902 EISENHOWER BLVD.									
STE. 185 TAMPA FL 3363 US	34-3327	STE. 185 Tampa Fl. 33634-6317 US						AMI KOMA MOMBE DEDA		1 0 0 0 1 1 1 0 # 1	
	Place of Business BGeorge Road	3. Mailing Address 4803 George Road			4						
Suite, Apt. #, etc. SUITE 360		Suite, Apt. #, etc. Sa (TE 360				DO NOT WRITE IN THIS SPACE					
City & Stat	e	City & State	FL		4.	FEI Number	5 9 -29492	50		plied For t Applicable	
Zip	634 U.S		Cour		5.	Certificate of	Status Desired		\$8.75 Add Fee Require		
	6. Name and Address of Current F	egistered Agent		Name	7.	Name and A	ddress of New	Registered A	igent		
	DON, MANUEL F.				dress (P.O.	Box Number i	s Not Acceptat	ole)			
4902 EISENHOWER BLVD							<u>BE ra</u>	21410			1
TAMPA FL 33634-3327				City	NE La Au	<u>360</u> 1		FL	Zip Code	634	
8. The above	named entity submits this statement for	the purpose of changing its	s register	ed office or r	registered a	gent, or both,	in the State of		حد∟	627	1
	Jun of C	7 1 1	- It	۰ م				4-27	1. AA		
SIGNATURE .	Signature, typed or printed name of registered agence	title if applicable (NO	TE Registere	d Agent signature	e required when	reinstating)		DATE	-00		
Tax filing r	pration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			50.00		ion Campaign I Fund Contribut			0 May Be I to Fees	
11.	OFFICERS AND D		12.	-	A	DDITIONS/CI	HANGES TO O	FFICERS AND		·	 @
TITLE NAME	PD Ginsberg, Sheldon	Delete	TITL NAM	- 1				_	Change	Addition	6/6) 1
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TITLE	STD	Delete	TITL	E		· · · · · · · · · · · · · · · · · · ·			Change	Addition	5
NAME STREET ADDRESS CITY-ST-ZIP	Gordon, Manuel F 4902 Eisenhower Blvd., #185 Tampa Fl			ne Eet address (- St- Zip	480 TAN	5 Geo	FC 3	Road -	See I TE	360	
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CITY-ST-ZIP			_	(-ST-ZIP					Change	Addition	-
TITLE NAME		Delete	TITL								
STREET ADDRESS CITY-ST-ZIP	· ·			EET ADDRESS (-ST-ZIP				•			
l indicated	I certify that the information supplied with I on this report or supplemental report is	true and accurate and that	my signa	iture shall ha	ive the same	e legal ettect a	is it made unde	er oath: that i a	um an oπicer	or alrector	1
of the co	poration or the receiver or trustee empo- , or on an attachment with an address, w	wered to execute this repor	t as requi	ired by Chap	pter 607. Eld	orida Statutes; <i>Uahhe</i>	and that my na	ime appears il	UDCK 11 OI	Block 12 if	1
SIGNAT		The Signing office		<u>ecTre</u>	an .	14.	-27-00 Date	813	-SBI-	110	
								-			1