2001 UNIFORM BUSINESS REPORT (UBR)

DOCU 1. Entity Nam INTERNA				-	FILE I APR 30 f	M 6: 19				
Principal Place of Business 14545 J MILITARY TRAIL. #167 DELRAY BEACH FL 33484 Mailing Address 14545 J MILITARY TRAIL DELRAY BEACH FL 33484 DELRAY BEACH FL 33484						SECRETARY OF STATE TALLAHASSEE. FLORIDA				
2. Principal P	Place of Business	3. Mailing Address						15 00 51 00 41 00 i		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State	City & State			4. FEI Number Applied For Not Applicable				
Zip	Country	Zip	Country			5. Certificate of Status Desired				
	6. Name and Address of Current	Registered Agent		I		7. Nam	e and Address of	New Register	ed Agent	
				Name						
Papadoyianis, ernest 2234 n. Federal Highway, suite 372				Street Address (P.O. Box Number is Not Acceptable)						
BOCA RATON FL 33431										
				City		· · · · · · · · · · · · · · · · · · ·		F	Zip Cod	e
8. The above	named entity submits this statement fo	or the purpose of changing its	egister	ed office or	registered	agent,	or both, in the State	of Florida.		
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTF	Registere	d Agent signatu	ire required wh	en reinstati	na)	DAT	É	— i
		FILE NO Make Check Pa	1 11	FEE IS \$		State				
Э.	MANAGING MEMB		10.				ADDIT	IONS/CHANG		
TITLE NAME STREET ADDRESS ¹ CITY-ST-ZIP	MANAGER XAVIBLT: CHERO, INVIT MILITARY DELRAY BEOCH,	HALL #167 FL. 33484			·				☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRUCKT. PAPADOVIA BRUCKT. PAPADOVIA 2234 N. FEDGRAL P BOCA RAYON, TC.	NIS □ Delete twy #37 ン .					80000 -0	0 421 5/15/01- **200.0	Change 7308 -01073	□ Addition
TITLE Name Street address City-St-Zip		☐ Delete						ANTONIO DE LOS	☐ Change	☐ Addition
ITLE IAME STREET ADDRESS		☐ Delete		Į.					☐ Change	☐ Addition
ITLE IAME TREET ADDRESS		□ Delete			<u> </u>				☐ Change	Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP	·-	□ Deleta		1				-	☐ Change	Addition
indicated	ertify that the information supplied with on this report is true and accurate and pility company or the receiver or trustee	that my signature shall have th	e same	e legal effec	t as if mad	le under	oath; that I am a r	utes. I further on the managing men	certify that the in nber or manage	formation r of the

4/21/01 635-5974

Date Day

sytime Phone #

R2E083 (11/0