2001 UNIFORM BUSINESS REPORT (URB)

1. Entity Name	MENT # LOOO	00013983		FILE	ED.		
Principal Place of Business 814 BRANTENBURG WAY LUTZ FL 33549		Mailing Address 814 BRANTENBURG WAY LUTZ FL 33549		2001 HAY -2 PM 3: 38 DIVISION OF CORPORATIONS TALLAHAR HEIRIGHT AND H			
2. Principal Place of Business		3. Mailing Address			[]	(
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. FEI Number Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of Status De	·	\$5.00 Add Fee Required	
6. Name and Address of Current Registered Agent			Name	7. Name and Address of	New Registered	Agent	
WITTNER, JONATHAN I 814 BRANTENBURG WAY LUTZ FL 33549			Street Address (P.O. Box Number is Not Acceptable)				
SIGNATURE .	named entity submits this statement f	t and title if applicable. (NOT:	Registered office or registrature requirement by the part of the p	ed when reinstating)	e of Florida. DATE		
9.	MANAGING MEME	BERS/MEMBERS	10.	ADDI*	TIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WITTNER, JONATHAN I 814 BRANTENBURG WAY LUTZ FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOWARD, JOHN F 5 HEATHERWOOD GREEN CROMWELL CT	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		04334 5/30/010	□ Change 525- 10780	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	***	·***30.00	Change -	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		4 ν	☐ Change	Addition
TITLE NAME STREET ADDRESC CITY-ST-ZIP	ertify that the information supplied wit	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		tuto) further	Change	Addition

indicated on this report is true and accurate and that my signature shall have he same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this eport as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

813-265-0033