UNIFORM BUSINESS REPORT (UBR)

Apr 07, 2002 8:00 am Secretary of State DOCUMENT # 201000003151 FLONDA SPANISH TRE ASONE HUNTERS 04-07-2002 90565 004 ****50.00 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 21380 N. MIAMI AV. SAME Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE MAAMI 4. FEI Number City & State City & State Applied For 65-1084829 YIAMIFL. Not Applicable Country Zip Country \$5.00 Additional 5. Certificate of Status Desired 33169 USA Fee Required 7. Name and Address of Current Registered Agent JAY AUERBACH & SQ. DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 2338 HOLLYWOOD BZVD Zip Code 33020 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida FEE IS \$50.00 Make Check Payable to Department of State DUE BY MAY 1 MANAGING MEMBERS/MANAGERS 9. MANAGER TITLE IRWIN T. SPARKS NAME NAME STREET ADDRESS STREET ADDRESS 21380 N. MIAMI AVE. MIAMI, FL. 33169 CITY-ST-7IP TITLE nne: NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP TITLE TITLE NAME MARKE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST 7IP TITLE TITLE NAME STREET ADDRESS CITY-ST ZIP CITY-ST-ZIP

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am a managing member or manager of the

MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

limited liability company or the Receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

305-653-2399

FILED

Date

Daytime Phone #