2000 UNIFORM BUSINESS REPORT (UBR)

OO APR 13 PM 4: 36 SECRETARY OF STATE Principal Place of Business Mailing Address Subs. AMN. Rept. Subs. Million Apr. 8: etc. ON APR 13 PM 4: 36 SECRETARY OF STATE TALL AHASSEE. FLORIDA Subs. AMN. Rept. Subs. Million Amn. Street ORLANDO Ft. 20812 SM4 DO NOT WRITE IN THIS SPACE A. Name and Address of Current Registered Agent To Country A. Name and Address of Current Registered Agent To Name and Address of New Registered To Name and Address of New Registered T	·				00 APR 13 PM 4: 36	
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1. 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 oath; that I am a managing member or manager of the	11. hereby c	certify that the information supplied wi	th this filing does not qualify	for the exemption stated in	n Section 119.07(3)(i), Florida Statutes. I further certify that the information	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER