2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2002 DOCUI	8)	FILED Apr 01, 2002 8:00 am Secretary of State												
1. Entity Nam			~ ~ 2						tai y 02 90632				₽	
Principal Place 104B E. FLETO TAMPA FL 338	CHER AVE.	Mailing Address 1048 E. FLETCHER AVE. TAMPA FL 33612				 		11)						
2. Principal P	ace of Business	3. Mailing Address					iren h III II				}			
Suite, Apt. #, etc. Suite, Apt. #, etc.				<u> </u>			DO NOT WRITE IN THIS SPACE							
City & State	е	City & State			<u> </u>	. FEI Nu	mber 5	9-28771	149			olied For Applicable]	
Zip Country		Zip Coun		ry 5. Ce			ate of St	atus Desir	ed 🔲		75 Addi Required			
	6. Name and Address of Current Re	gistered Agent	- I			'. Name	and Add	ress of Ne	w Registe	red Ager	nt		1	
	CHRISTOPHER P DC OOKED LANE 13549		= <u></u>		ddress (P.0 2932). Box Nu	mber is I	DMSI. Not Accep	table)	D.C		2-		
ς.		<u></u>			Desle					FL	Zip Code	33543	-	
8. The above	named entity submits this statement for the stat			ed office or				the State (1	<u>alor</u>				
Tax filing r	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW After May 1, 2 Make Check Paya	002 Fee	will be \$5	50.00	10.		Campaig und Contrik	n Financing oution.	, _		May Be to Fees		
11.	OFFICERS AND DI	RECTORS	12.			ADDITIO	NS/CHA	NGES TO	OFFICERS	AND DIF	ECTORS]_	
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indicated of the col	certify that the information supplied with the on this report or supplemental report is transfer or trustee empower, or on an attachment with an address with	rue and accurate and that rered to execute this repo	t my signa ert as requi	ture shall b	ave the sa	me legal e	ettect as	it made ur	ider oath: II	nariam a	n omcer i	or airector		