FILED Apr 30, 2003 8:00 am Secretary of State

04-30-2003 90124 018 ***158.75

Principal Place of Business 2601 GATEWAY DRIVE POMPANO BEACH FL 33069 US		Mailing Address 2601 GATEWAY DRIVE POMPANO BEACH FL 33069 US					11023103	
2. Principal Place of Business				3. Mailing Address				T JURIOUSH JOH TOUGHA HOOK HIRM ORMY GARL BURK BIGH BIGH BURK GURK GURK GURK HOOK
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES
City & State				City & State			4.	FEI Number 65-0575198 Applied For Not Applicable
Zip	Country _			Zip Coui		5. Certificate		Certificate of Status Desired \$8.75 Additional Fee Required
	and Address of Current I	d Agent	- 		7.	7. Name and Address of New Registered Agent		
ICACKCON IEDDA						Name		
ISACKSON, JERRY 2601 GATEWAY DRIVE				Street Addres			ess (P.O. E	Box Number is Not Acceptable)
POMPANO BEACH FL 33069								
, 01 1 10				l		City		E ∎ Zip Code
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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							<u> </u>	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. \$4.00 May Be Added to Fees
10. OFFICERS AND D				DIRECTORS 11.			AC	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS	P ISACKSON, JERRY 2601 GATEWAY DRIVE POMPANO BEACH FL 33069			E		í		☐ Change ☐ Addition
NAME STREET ADDRESS		EWAY DRIVE		☐ Delete		ET ADDRESS		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS	POMPANO BEACH FL 33069 T SHEFFEL, MIKKI 2601 GATEWAY DRIVE POMPANO BEACH FL 33069			Delete TITLE NAME STREET ADDR CITY-ST-ZIP		ET ADDRESS	<u> </u>	Change Addition
TITLE NAME STREET ADDRESS	VP ISACKSON 2601 GATE	 		Delete				☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		- 1		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		information reported with		Delete	CITY-			Change Addition

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 or supplerylental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

M82104

e 73.

DOCUMENT #

BRYAN ASHLEY INTERNATIONAL, INC.

1. Entity Name