2000 UNIFORM BUSINESS REPORT (UBR)

2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # M9900001178 1. Entity Name				APPROVED AND FILED	
Principal Place of Business Mailing Address				SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1911 65TH AVENUE WEST 1911 65TH A		1911 65TH AVENUE WE TACOMA WA 98466-622			
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 Applied For Not Applied For	,
Zip	Country	Zip	Country	5. Certificate of Status Desired	
	6. Name and Address of Curren	t Registered Agent	Name	7. Name and Address of New Registered Agent	-
C T CORPORATION SYSTEM		•	Street Addre	ress (P.O. Box Number is Not Acceptable)	1
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324					1
PLANIAII	UN FL 33324		City	FL Zip Code	1
8. The above	named entity submits this statement	for the purpose of changing i	ts registered office or regi	gistered agent, or both, in the State of Florida.	
SIGNATURE .	Signature, typed or printed name of registered ager	nt and little if applicable (Ni	OTE: Registered Agent signature rec	required when reinstating) DATE	
		l l	NOW!!! FEE IS \$50.0 Payable to Departmen		
9. MANAGING MEMBERS/MEMBERS		10.	ADDITIONS/CHANGES]ຸຄ	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PAGE, J. DAVID 1911 65TH AVENUE WEST TACOMA WA 98466	C.) Delicto	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	E083 (9/
TITLE MAME STREET ADDRESS	TACORIA WA GORGO	Delete	TITLE MAME STREET ADDRESS	1000032387119 -05/03/0001155019	CR2
CITY-81-ZIP		☐ Delete	CITY- 87- ZIP TITLE	*****50.00 *****50.00 Change Addition	-
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS		☐ Defets	TITLE NAME STREET ADDRESS	Change Addition	
CITY- 81-ZIP			GITY- 8T- ZIP	☐ Change ☐ Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP		L.J. DEBSE	NAME STREET ADDRESS CITY- ST- ZIP		
VITLE NAME STREET ADDRESS		☐ Defete	TITLE NAME STREET ADDRESS	Change Addition	1
CITY-8T-ZIP	pertify that the information supplied wi	th this filing does not qualify	CITY-ST-ZIP	f in Section 119.07(3)(i), Florida Statutes. I further certify that the information	-
indicated	on this report is true and accurate an bility company or the receiver of trust	d that my signature shall hav	e the same legal effect as	as if made under oath; that I am a managing member or manager of the	