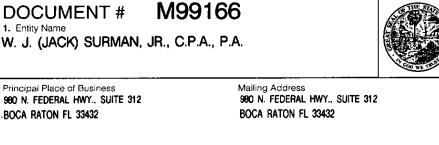
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)



3. Mailing Address

Mar 24, 2003 8:00 am 3 Secretary of State **FILED**

03-24-2003 90226 039 ***150.00

10045362

Suite, Apt. #, etc.			Suit	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State			City	& State		4	4. FEI Number 65-0072391			oplied For ot Applicable	
Zip	Country Zig			Country		. 5	5. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name	and Address of Ci	rrent Registere	ed Agent	n = = = =	- 7	. Name and Address of New R	egistered Ag	ent		
*****					Name						
SURMAN, W. J. (JACK) JR. 406 S.W. 7TH TERRACE					Street A	Street Address (P.O. Box Number is Not Acceptable)					
_						~					
ROCA HA	TON FL 33	486									
						City FL Zip Code					
			nent for the purp	ose of changing its re	gistered office o	r registered	agent, or both, in the State of Flo	rida. I am far	niliar with,	and accept	
the obligat	tions of regis	tered agent.					↑			İ	
SIGNATÜRE .		<u>*</u>									
SIGNATURE	Signature, typed	or printed name of registere	d agent and title if app	olicable. (NOTE: R	egistered Agent signa	ture required whe	en reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00							Election Campaign Fin Trust Fund Contribution			0 May Be	
Make Check	k Payable t	o Florida Departm	ent of State				Trust Fund Contribution		Added	1101 003	
10.		→ OFFICERS	AND DIRECTO	PRS	11.		ADDITIONS/CHANGES TO OFF	CERS AND D	RECTOR	S IN 11	
TITLE	PS			☐ Delete	TITLE				☐ Change	Addition	
NAME		William J Jr.		Delete	NAME			•			
STREET ADDRESS		DERAL HWY, STE	312		STREET ADDRESS					1	
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12. 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 supplemental 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 or 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:

2. Principal Place of Business

WILLIAM I SURMAN IN