NOT-FOR-PROFIT CORPORATION

UNI	IFORM BUSINE	SS REPORT	(UBR)	,		
DOCUME 1. Entity Name	ENT # NOOOC	1002057	. ,	FILED		
Selective Choices INC.				02 MAY -1 PM 5: 15		
DO NOT WRITE IN THIS SPACE				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Place of Business 10 Day Dec (OGC) 3 Mailing Address 433				7 14g		
Suite, Apt. #, et	<u> </u>	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State	n(c	City & State		4. FEI Number 59.363	Applied For Not Applicab	le.
Zip 2 2 2 2 2	3 Cadsdew	Zip	Country	5. Certificate of Sta	\$ \$9.75 Additional	
4/02	Caasaen	<u> </u>		, 7. Name and Addre	ss of Current Registered Agent	
	DO NOT W	DITE	Name :	Ammire Co	older :-	
DO NOT WRITE IN THIS SPACE			Street Addres	Street Addiess (P.O. Box Number is Not Acceptable)		
	IN THIS SP	ACE	City of		Tie Code e = C	_
				Canla	FL 23333	
8. The above name	ed entify submits this statement for	the purpose of changing its re	egistered office or regis	stered agent, or both, in t	the state of Florida.	
SIGNATURE	ining!	Wolder	4/30/02			
9/g ₀₂ a	ture typed or printed name of registered agent a	nd title if applicable. (NOTE: R	Registered Agent signature requ	rired when reinstating)	6 _{ATE} 7	
lniti	FEE IS \$61.25 ial or Amended UBR	9. Election Camp Trust Fund Cor		\$5.00 May Be Added to Fees	Make Check Payable to Department of State	
10.	OFFICERS AND DIR	ECTORS Director	TITLE			<u>-</u>
NAME STREET ADDRESS	Jimmie Golder	C) / Care	111110			
CITY-ST-ZIP	10. 13 Ma	Marla, FL 3238	NAME STREET ADDRESS CITY-ST-ZIP			37B (12/01)
TITLE	PN Chalcles Ju	Warla, FL 323B	STREET ADDRESS CITY-ST-ZIP	900	0053899796	R2E037B (12/0
TITLE NAME STREET ADDRESS	en Colden 50	Maria, FL 3238	STREET ADDRESS CITY-ST-ZIP	900	0053899796 -04/30/0201025001 *****70.00 *****70.00	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	O. Box 433 Ma O. Box 433 Ha	Marla, FL 3238 Marla, FL 3238	STREET ADDRESS CITY-ST-ZIP	900	-04/30/0201025001	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	O. Box 433 Ma O. Box 433 Ha Rhonda Bo	Marla, FL 3238 LI Trustre Marla fl 3238 Own Trustee	STREET ADDRESS CITY-ST-ZIP	900	-04/30/0201025001	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	O. Box 433 Ma O. Box 433 Ha Po. Box 433 Ha	Marla, FL 3238 LI Trustic Marla FC 3238 Own Trustee Lana, FC 32333	STREET ADDRESS CITY-ST-ZIP		-04/30/0201025001	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PO BOX 433 Ha	Marla, FL 3238 L./ Trustic Marla, FC 3233 Dwn / Trustee Jana, FC 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DO	-04/30/0201025001 *****70.00 *****70.00	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	10. Box 433 Ma Phonda Br Po. Box 433 Ha	Marla, FL 3238 L./ Trustic Marla, FC 3233 Own Trustee Landa, FC 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	20. Box 433 Ma EN Colden 58 10. Box 433 Ha Po. Box 433 Hau	Marla, FL 3238 L./ Trustec Marla, FC 3233 DWN / Trustec Landa, FC 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	O. Box 433 Ma O. Box 433 Ha Po. Box 433 Ha	Marla, FL 3238 LI Trustre Marla, FL 3238 NON Trustre Landa, FL 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	O. Box 433 Ma O. Box 433 Ha Po. Box 433 Ha	Marla, FL 3238 LI Trustic Marla, FL 3238 Market Junia, FL 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	O. Box 433 Ma O. Box 433 Ha Po. Box 433 Hau	Marla, FL 3238 LI Trustic Marlay FC 3238 OWN Trustee landa, FC 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	20. Box 433 Ma 20. Box 433 Ha Phonda Bo Po. Box 433 Ha	Marla, FL 3238 LI Trustic Marla, FC 3238 OWN Trustee landa, FC 32333	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	DO	-04/30/0201025001 *****70.00 *****70.00 NOT WRITE	CR2E037B (12/0

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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/30/02