2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # N36106

FILED May 05, 2003 8:00 am § Secretary of State

1. Entity Nan	T COUNT		inium no. 10 assoc	CI VI		05-05-2003 90198	013 ****61.2	25	
Principal Place of Business 981 S. HILLCREST CT. HOLLYWOOD FL 33021 US			Mailing Address 981 S. HILLCREST CT. HOLLYWOOD FL 33021 US			ANG 1111 A SISKS 11815 AGUS AGUS SINI SI	aigh giàil aigh B'ài	1 61911 1281	
2. Principal Place of Business			3. Mailing Address	·					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State			City & State		4. FEI Numb	4. FEI Number 65-0233016		plied For t Applicable	
Zip		Country	Zip	Country		of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent					7. Name and	Address of New Register	ed Agent		
MUIRHEAD, THERESA 981 S HILLCREST CT BLDG 10 APT 108 HOLLYWOOD FL 33021				Street &	PATRICIA Proses (P.S. Box, Numb		#109	Btoy 10	
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 \$61.25 . 9. Election Campaig Trust Fund Contri					\$5.00 May to Added to Fees		eck Payable partment of S		
10.		OFFICERS AND DIR	ECTORS	11.	ADDITIONS/CH	IANGES TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME	VP Bosio, At		☐ Delete	TIȚLE NAME			☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP		CREST CT 309 OD FL 33021		STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS		ESTELLE LCREST CT 211 OD.FL:33021	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME	PD ALPINE, P		☐ Delete	TITLE NAME		, · · · · · · · · · · · · · · · · · · ·	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	HOLLYWO	CREST CT 109 OD FL 33021		STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS		CREST CT 101	☐ Delete	NAME STREET ADDRESS			☐ Change	Addition	
TITLE NAME	SD	OD FL 33021	Delete	CITY-ST-ZIP TITLE	Sean Mel	eroy cleater #105	Change	Addition	
		ERNESTINE	—	NAME STREET ADDRESS	981 5. Hule	centation		{	
STREET ADDRESS CITY-ST-ZIP TITLE		CREST CT 10 308	⊅ Delete	CITY-ST-7IP	HWD FLZ		Change	Addition	

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: