2002 UNIFORM BUSINESS REPORT (UBR.)

FILED Sep 25, 2002 8:00 am Secretary of State

09-03-2002 90123 038 ****61.25

DOCUMENT # N49218 1. Entity Name SOUTH FLORIDA COUNCIL ON STATE TAXATION, INC. Principal Place of Business Mailing Address % ALLEN H. LIBOW, ESO. % ALLEN H. LIBOW, ESQ. 42990 1200 N. FEDERAL HIGHWAY, SUITE 301 1200 N. FEDERAL HIGHWAY. SLITE 301 **BOCA RATON FL 33432** BOCA RATON FL 33432 US 2. 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 65-0338237 Not Applicable Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LIBOW, ALLEN H ESQ. Street Address (P.O. Box Number is Not Acceptable) GRANER ROOT & LIBOW, P.A. 1200 N. FEDERAL HIGHWAY, SUITE 301 **BOCA RATON FL 33432** City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE After September 13, 2002, 9. Election Campalgn Financing \$5.00 May Be Make Check Payable to min. will be \$236.25. Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE PD ☐ Delete TITLE NAME FOWLER, DEBORAH Chance ☐ Addition NAME STREET ADDRESS 200 E B ROWARD BLVD, #1310 STREET ADDRESS CiTY-ST-21F FORT LAUDERDALE FL 33301 CITY-ST-ZIP TITLE ☐ Dalete ☐ Change NAME ☐ Addition LIBOW, ALLEN ESQ NAME STREET ADORESS 1200 N FEDERAL HIGHWAY, #301 STREET ADDRESS CITY-ST-7IP **BOCA RATON FL 33432** CITY-ST-71P TITLE Delete TITLE NAME MITTENTHAL, JOSHUA M ESQ Change. 'Addition SHAHEEN, WILLIAM-M-NAME STREET ADDRESS 1200 N FEDERAL HIGHWAY, #301 1200 N FEDERAL HIGHWAY, #301 STREET ADDRESS CITY-ST-7IP BOCA RATON FL 33432 CITY-ST-ZIP BOCA RATON, FL 33432 TITLE Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change NAME □ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MLE Delete TITLE NAME ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

8/30/03