DOCU!		SINESS REPO 00005860	RT (L	JBR)	FILED Feb 22, 2001 08:00 AM Secretary of State	
Principal Place 2745 EAST ATI STE-301 POMPANO BE 33062	LANTIC BLVD	Mailing Address 2745 EAST ATLANTIC BLVD STE-301 POMPANO BEACH 33062	· · · ·	FL	<del>-</del>	
,	lace of Business  MMERCIAL BLVD.  #, etc.	3. Mailing Address 2929 EAST COMMERCIAL BL' Suite, Apt. #, etc. SUITE 205	/D		DO NOT WRITE IN THIS SPACE	
City & State		City & State		FL	4. FEI Number Applied For 65-0634228 Not Applicab	
Zip	Country	Zip	Country		5. Certificate of Status Desired S \$8.75 Additional	
33308	6. Name and Address of Curre	ant Registered Agent	us		7. Name and Address of New Registered Agent	
DEEDED		rogistered Ageilt	N	Name	Name and Address of New Registered Agent	
REEDER GERARD S 5841 N.E. 22 AVE.				Street Address (P.O. Box Number is Not Acceptable)		
FT. LAUDE	RDALE US	FL		Dity	Zip Code	
					egistered agent, or both, in the state of Florida.	
	FILE NOW: FEE IS \$61.25	9. Election Campaigr Trust Fund Contrib			\$5.00 May Be Added to Fees  Make Check Payable to Department of State	
10.	OFFICERS AND		11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAMAN RICHARD I 1501 S.E. 4 AVE. FT. LAUDERDALE	Delete FL 33316	TITLE NAME STREET AI CITY-ST-	I	☐ Change ☐ Addith	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAMAN RICHARD I 1501 SE 4TH AVE FORT LAUDERDALE	☐ Delete  FL 33316	TITLE NAME STREET AI CITY-ST-		☐ Change ☐ Additi	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ CHRIS 709 GARDENS DR APT-202 POMPANO BEACH	☐ Delete FL 33069	TITLE NAME STREET AI CITY-ST-	DORESS 2	D Change Additi RODRIGUEZ CHRIS 225 GLENWOOD BLVD DAVENPORT FL 33069	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REEDER GERARD S 5841 N.E. 22 AVE. FT. LAUDERDALE	☐ Delete  FL 33308	TITLE NAME STREET AI CITY-ST-		☐ Change ☐ Additi	
TITLE NAME STREET ADDRESS CITY-SI-ZIP		☐ Delete	TITLE NAME STREET A	Ţ	☐ Change ☐ Additi	
TITLE NAME		☐ Delete	TITLE NAME		☐ Change ☐ Additi	

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 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Gerard S. Reeder

D

02/22/2001