2001 UNIFORM BUSINESS REPORT (UBR)

Sep 17, 2001 8:00 am Secretary of State DOCUMENT # N9800006207 9-17-2001 90006 011 ****61.25 ART OF LIVING, INC. Principal Place of Business Mailing Address 834 SW 11TH STREET 834 SW 11TH STREET FORT LAUDERDALE FL 33315 **SUITE 121** FORT LAUDERDALE FL 33315 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 65-0875709 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) AQEEL, KAMEELAH 834 SW 11TH STREET FORT LAUDERDALE FL 33315 Zip Code FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees After September 12, 2001, min. will be \$236.25 **Department of State** OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Addition RUPP, SANDY NAME NAME STREET ADDRESS 2323 S.E. 28TH ST SUITE 8 STREET ADDRESS FT LAUDERDALE FL 33316 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition CHILDS, JOAN NAME NAME 2500 E HALLANDALE BEACH BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HALLANDALE FL 33009 D ☐ Delete TITLE ☐ Change Addition **DEMEHICI, JOHN** NAME NAME STREET ADDRESS 8002 NORTHWEST 10 STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL 33322 TITLE ☐ Delete TITLE ☐ Addition Change FRIED, STEVEN NAME NAME STREET ADDRESS 19501 BISCAYNE BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NORTH MIAMI BEACH FL 33180** TITLE Delete TITI F ☐ Change ☐ Addition NAME MILLER, BRENDA NAME STREET ADDRESS 1001 SOUTHEST 12TH AVENUE STREET ADDRESS CITY-ST-ZIP DANIA FL 33004 CITY-ST-7IP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing cose 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 occurate 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

SIGNATURE:

changed, or on an attachment with

FILED