2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

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FILED Mar 11, 2003 8:00 am Secretary of State

TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1. Entity Nar JACK H.	TANENBAUM FINANCIAL	03-11-2003 90146 021 ***150.00				
Suits, Api #, etc. Chip & State	9180 OAKHURST ROAD SUITE 3		9180 OAKHURST. ROAD Suite 3			8) 8388 8388 8888 8881 4881	
City & State City & State City & State City & State City & State A. FEI Number 59-3617363 Applied For	2. Principal I	Place of Business	3. Mailing Address				
Zip Country Zip Country Zip Country S. Certificate of Status Desired Service S	Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES		
S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent SPECEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134 City City FL City FL	City & State		City & State		5953617363		
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134 6. The abover named entity submits this statement for the purpose of changing its registared office or registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the collegations of registered agent, or both, in the State of Florida. If am farmitime with, and accept the coll	Zip		'	Country		3.75 Additional	
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Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)				Name			
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature File Now!!! FEE IS \$150.00	· – •						
SIGNATURE FILE NOW!!! FEE IS S150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Floridal Department of State 10.				'		· ·	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$55.00 May Be Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME 1712 1714 1714 1714 1714 1714 1714 1715 1714 1715 1714 1715 1714 1715 1715 1716 1716 1716 1717 1717 1718	the obligat	e named entity submits this statement for tions of registered agent.	or the purpose of changing its	s registered office or regist	tered agent, or both, in the State of Florida. I am fam	iliar with, and accept	
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that my signature shall have the same legal effect as if made under oath; that I am an officer or director open as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the rechanged, or on an attachme

SIGNATURE:

Daytime Phone #