FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Mar 17, 2003 8:00 am Secretary of State

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1. Entity Na	JMENT # P000000 & Luntz, P.A.	12554			03-17-2003 91	106 004 ***150.00
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Solite 103 Sutte			3. Mailing Addr	ess	S. C.		
Suite 103 Coy & State Deerfield Beach, FL Deerfield Beach, FL Deorfield Beach, FL Do NOT WRITE IN THIS SPACE TO NOT WRITE IN THIS SPACE The above named entity such mis this statement for the purpose of changing its registered direct or registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with, and accept the children of registered agent, or both, in the State of Fords. I am familiar with and accept the children of Fords. I am familiar with, and accept the children of Fords. I am familiar with, and accept the children of Fords. I am familiar with a familiar wi	10 Fairway Drive 10 Fairway Dr			ay Drive			
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Second State Seco	Only di diate			d Beach. W	'T .	1 ***	
To Name and Address of Current Registered Agent The Address of P.O. Box Number is Not Acceptable Street Address of P.O. Box Number is Not Acceptable 10 Tailway Drive Suite 103	Zip	Country Zip					\$8.75 Additional
DO NOT WRITE IN THIS SPACE Street Address F. Land	11 7 7 7 7		JJ441	. JUSA			
IN THIS SPACE Street Address (P.O. Box Number is Not Acceptable) 10 10 Fairway Drive Suite 103	المعتقدة والمارية	رای در		en de la companya de	Name	· · · · · · · · · · · · · · · · · · ·	rered Agent
IN THIS SPACE The above ramed 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, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida, I am familiar with, and accept the purpose of Carles and accept the	4	DO NOT	WRITE		Beverle	y Luntz, Esq.	
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	12. I hereby ce	ertify that the information are all and	sith this files			<u>, marking the state of the sta</u>	<u>- </u>

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 attachment with an address, with all other like empowered.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Beverley Luntz

(954) 596-2527

Daytime Phone #