JILL S. RATZAN & ASSOCIATES, INC.

Principal Place of Business

Mailing Address

511 CHEROKEE AVENUE MIAMI FL 33140

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2. Principal Place of Business 7100 Biscayne Blud 7100 Biscayne Blud. Suite, Apt. #, etc. 206 206 City & State City & State

DO NOT WRITE IN THIS SPACE

Miami 6. Name and Address of Current Registered Agent

Miami

Country

65-098845 5. Certificate of Status Desired

\$8.75 Additional Fee Required

Applied For

Not Applicable

7. Name and Address of New Registered Agent

RATZAN, JILL S **511 CHEROKEE AVENUE MIAMI FL 33140**

Tax filing requirement and elects to do so.

Street Address (P.O. Box Number is Not Acceptable)

4. FEI Number

City

(NOTE: Registered Agent signature required when reinstating)

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.

(See criteria on back)

9. This corporation is eligible to satisfy its Intangible

Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. PATZAN, PETER E. Change Addition Delete TITLE TITLE RATZAN, JILL S NAME NAME SIII CHEROKEE AVE. **511 CHEROKEE AVENUE** STREET ADDRESS STREET ADDRESS MIAMI FL 33140 CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE rubenstein, anita NAME NAME 7 trombley Dr. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP uvingston NJ 07039 ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP

13. I hereby certify that the information supplied with this filing 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. changed, or on an attachment

SIGNATURE:

JILL S. RATZAN

CR2E034 (10/00)