9/12/01-90010-003-\$550.00-\$550.00

Zip Country Zip Country 5. Certificate of Status Desired \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Fee Required  7. Name and Address of New Registered Agent Name  CORPORATION SERVICE COMPANY  1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City FL Zip Code  8. The above framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, hipsed or pretad name or registered agent and this if applicable. (NOTE: Registrated Agent algebraic required when reintailing)  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution. Added to Fei Title  SADOSKY, STEPHEN  TITLE  SADOSKY, STEPHEN  7241 SOUTHPORT DRIVE  BOYNTON BEACH FL 33437	Principal I Suite, Apt City & Sta Zip CORPORA TALLAHAS	PORT DRIVE FACH FL 33437  Place of Business  I. #, etc.  Ite  Country  6. Name and Address of Current Re  ATION SERVICE COMPANY  S STREET	7241 SOUTHPORT DRIVE BOYNTON BEACH FL 33 3. Mailing Address Suite, Apt. #, etc. City & State	437		4. FEI	DO NO:	T WRITE IN THIS	SPACE AN \$8.75 Ad	pplied For ot Applicable ditional
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Do Not Write in this space  City & State  Country  Sire Country  Sire of Address of New Registered Agent  Name  CORPORATION SERVICE COMPANY  Sire Address (P.O. Box Number is Not Acceptable)  Sire Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code  TALLAHASSEE FL 32301-2525  City  FL Zip Code  The above fiamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  Signature, hybrid or printed name of registered agent and their applicable.  Note: Registered Agent signature required when reinstating)  The above fiamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  Signature, hybrid or printed name of registered agent and their applicable.  In a state of Florida.  In a state of Florida.  NATE: Registered Agent signature required when reinstating)  Date  The NOW III Flee III See will be \$750.00  Make Check Payable to Department of State  TILL NAME  SADOSKY, STEPHEN  TILE NAME  SADOSKY STEPHEN  TILE	Suite, Apt City & Sta Zip CORPORA 1201 HAY TALLAHAS	Country  6. Name and Address of Current Re  ATION SERVICE COMPANY S STREET	Suite, Apt. #, etc.  City & State  Zip	Countr		4. FEI	DO NO:	FWRITE IN THIS	SPACE	pplied For ot Applicable ditional
Suite, Apt. #, etc.  Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  Country  Zip  Country  Zip  Country  S. Certificate of Status Desired  \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent  Name  CORPORATION SERVICE COMPANY  1201 HAYS STREET  TALLAHASSEE FL 32301-2525  City  FL  Zip Code  The above flamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  GNATURE  Syname, typed or printed name of registered agent and refer the purpose of the purpose of the purpose of changing its registered Agent supraise required when reinstating)  This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  After September 12, 2001 Fee will be \$750.00  Make Check Payable to Department of State  Discontinuation.  OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 MARE  STREET ADDRESS  CITY-SI-ZIP  BOYNTON BEACH FL 33437	Suite, Apt City & Sta Zip CORPORA 1201 HAY TALLAHAS	Country  6. Name and Address of Current Re  ATION SERVICE COMPANY S STREET	Suite, Apt. #, etc.  City & State  Zip	Countr		5. Cer	Number 0896	643	\$8.75 Ad	ot Applicable
Some and Address of Current Registered Agent   Street Address of New Registered Agent   Street Address (P.O. Box Number is Not Acceptable)   Street Address	Zip ORPORA 201 HAY ALLAHA!	Country  6. Name and Address of Current Re ATION SERVICE COMPANY S STREET	Zip	Countr		5. Cer	15 0896		\$8.75 Ad	ot Applicable
Zip Country	ORPOR/ 201 HAY ALLAHA!	6. Name and Address of Current Re		Countr		5. Cer			\$8.75 Ad	ditional
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)  Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code  The above framed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SNATURE  Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE  This corporation is elligible to satisfy its Intangible Tax fling requirement and elects to do so.  (See criteria on back)  OFFICERS AND DIRECTORS  TITLE  SADOSKY, STEPHEN TANDRESS 7241 SOUTHPORT DRIVE BOYNTON BEACH FL 33437	201 HAY ALLAHA!	ATION SERVICE COMPANY 'S STREET	gistered Agent		Name -	7 1/2-				
Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City FL Zip Code  The above finamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  NATURE  Signature, hipsed or printed name of registered agent and title Fapolicable. (NOTE: Registered Agent signature required when reinstating)  DATE  FILE NOW!!! FEE IS \$550.00  After September 12, 2001 Fee will be \$750.00  Make Check Payable to Department of State  OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  SADOSKY, STEPHEN  FADORESS  7241 SOUTHPORT DRIVE  BOYNTON BEACH FL 33437	201 HAY ALLAHA!	'S STREET	-			/ NAT	me and Address of	New Registered		
The above fiamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SINATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  OFFICERS AND DIRECTORS  12.  OFFICERS AND DIRECTORS  12.  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  E SADOSKY, STEPHEN  SANDSKY, STEPHEN  SANDSKY, STEPHEN  SANDSKY, STEPHEN  TAX STEPHEN  SANDSKY, STEPHEN  S		SSEE FL 32301-2525	1201 HAYS STREET				s (P.O. Box Number is Not Acceptable)			
The above hamed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SNATURE    Signature, typed or printed name of registered agent and title? applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE	The above			ļ	City			- El	Zip Coo	le
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  This corporation is elligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  OFFICERS AND DIRECTORS  E  D  SADOSKY, STEPHEN  ET ADDRESS 7-ST-ZIP  NOTE: Registered Agent signature required when reinstating)  After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State  10. Election Campeign Financing Trust Fund Contribution.  Added to Fei  \$5.00 Max Added to Fei  Added to Fei  SADOSKY, STEPHEN  TITLE  NAME STREET ADDRESS CITY-ST-ZIP  OATE  10. Election Campeign Financing Trust Fund Contribution.  Added to Fei  STRUCT ADDRESS CITY-ST-ZIP  CITY-ST-ZIP  OATE  10. Election Campeign Financing Trust Fund Contribution.  Change  \$5.00 Max Added to Fei  STRUCT ADDRESS CITY-ST-ZIP  CITY-ST-ZIP		hamed entity submits this statement for the	ne purpose of changing its	s registere	d office or registe	ered agent	t, or both, in the State		- 1	
E D Delete TITLE Change A  SADOSKY, STEPHEN NAME  EET ADDRESS 7241 SOUTHPORT DRIVE STREET ADDRESS DOYNTON BEACH FL 33437 CITY-ST-ZIP	Tax filing (See crite	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW After September 1 Make Check Paya	/!!! FEE    2, 2001 F  able to Dej	IS \$550.00 se will be \$750	0.00 ate	10. Election Campai Trust Fund Contr	gn Financing ibution.	_ Adde	d to Fees
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E	e Et address		☐ Delete	STREET	T ADDRESS				☐ Change	Addition
ET ADDRESS STREET ADDRESS	EET AODRESS		☐ Delete	NAME_ STREET	LADDRESS			يدار دور دس	Change	Addition
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