2001 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2001 8:00 am Secretary of State

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ROLLINDA VENEU & DOUR		1

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Principal Pla	ace of Business	Mailing Address					
3296	NORTH STATE Road	7 3296 NO	NTH STATE ROD	id 7	•		
	erdele-fl	Lauderda	le. H.				
2. Principal	Place of Business V. STATE Rd. 7	3. Mailing Address 3500 N. 57	ATE Rd. 7		7700	3 3	
Suite. Ap	rt. 存. etc.	Suite, Apt. #, etc.		DO	NOT WRITE IN THIS SP	ACE	
City & Sta LAV DEN	RUALE LAKES. H	City & State LADERVALE LI	AKES. H.	4. FEI Number /00(gr.		oplied For or Applicable
Zip 33	319 Country	33319	Country	5. Certificate of Status		B.75 Addee Require	
	6. Name and Address of Current R	egistered Agent		7. Name and Address	of New Registered Ag		
0.6	ANDIC CHARLIE M		Name				
6150 W 5 LH.			(P.O. Box Number is Not A	cceptable)			
HI	1ALEAH. 28. 3301	12					
			City		FL	Zip Code	e
\$. The above	e named entity submits this statement for t	the purpose of changing it	s registered office or regist	ered agent, or both, in the S	state of Florida.		
0.00.47.105							!
SIGNATURE	Signature, typed or printed name of registered agent and	n title if applicable (110)	TE Registered Agent signature requir	ed when reinstating)	DATE		-
Tay filing	ocration is eligible to satisfy its Intangible requirement and elects to do so. Aria on back)	After MAY 1, 20	!!! FEE IS \$150.00 001 Fee will be \$550.00 ble to Department of St	ate	ontribution.	Added	0 May Be I to Fees
Tay filing	requirement and elects to do so.	After MAY 1, 26 Make Check Paya	!!! FEE IS \$150.00 001 Fee will be \$550.00	ate Trust Fund C	ontribution.	Added	to Fees
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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 barr, man an ornice of directors 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.

4/28/01