| | MENT# POWO | 0042240 | | V | | LED 2001 8: | :00 an |
|--|--|---|--|---|--|--|---|
| Wood | bridge Financial | Company | | | Secretar 05-22-2001 90 | \mathbf{y} of \mathbf{S} | tate |
| rincipal Plac | ce of Business | Mailing Address | <u> </u> | , a | | | |
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| | Place of Business LL S.E. 4th Street | 3. Mailing Address | .v. D | ula | - D 0 1 | 056416 | |
| Suite, Apt. | - V. V. Olicel | 127 W. Farrbay Suite, Apt. #, etc. # 454 | NKS I | | DO NOT WRITE II | N THIS SPACE | |
| City & Stat | RATON, FLORIDA | <u> </u> | 31K | Florida | 4. FEI Number | | Applied For |
| Zip. 3343 | Country | z _p 32789 | Count | | 5. Certificate of Status Desired | | Not Applicable Additional |
| <u> </u> | 6. Name and Address of Current R | | | | 7. Name and Address of New Regi | Fee Requestered Agent | uired |
| SPIR | EGEL & UTRA | RA | ļ | Name | (70.0 | | |
| Cor | LAL GABLES, FL | ORIDA. | - | Street Address | (P.O. Box Number is Not Acceptable) | | |
| | | | - | City | | C1 Zip C | Code |
| The above | named entity submits this statement for | the nurnose of changing its | registere | | red scent or both in the State of Florida | rt | - |
| | | tio perpend of otheriging | ogioto.c. | d billoc or raginal | iou agoin, or boar, in oro same or results | • | |
| | | | | | | | |
| GNATURE . | Signature, typed or printed name of registered agent an | d title if applicable. (NOTE: | Registered | Agent signature required | d when reinstating) | DATE | |
| This corpo | Signature, typed or printed name of registered agent an oration is eligible to satisfy its Intangible equirement and elects to do so. | of tite if applicable. (NOTE: FILE: NOW!! After MAY 1-200 Make Check Payabi | PEE I | S \$150.00 vill be \$550.00 | 10. Election Campaign Finance Trust Fund Contribution. | ing _ \$5 | 5.00 May Be ded to Fees |
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George Quintero Director 04/20/01 (407) 414-3308