

**FILED**  
**Jan 13, 2003 8:00 am**  
**Secretary of State**

0504987 AV



Mailing Address  
744 SCOTT LAKE VILLAGE NORTH  
LAKELAND FL 33813

2. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE OF REQUESTING OFFICER SHIV KUMAR H. PATEL 1-12-03 863-984-0842  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR