2002 UNIFORM BUSI	NESS REPO	FILED Apr 16, 2002 8:00 am Secretary of State 04-16-2002 90030 041 ***150.00			
DOCUMENT # P00000071865 Entity Name			Secretary of State		L. A
JORDAN DEVELOPMENT CORPORAT	TION		04-16-2002 90030 041 ***1	50.00	
Principal Place of Business 611 LINCOLN ROAD STE 201 MIAMI BEACH FL 33139	Mailing Address 611 LINCOLN ROAD STE 20 MIAMI BEACH FL 33139	וכ			
-					
2. Principal Place of Business 300 7157 Street	3. Mailing Address 3007137 St	roet	* 100 (100) 111 OC11/ 0 01/1 00/11 00/11 04/11 51/11 (55/44) 100/)	NIIN RIINI NIII IONI	
Suite, Apt. #, etc. 527	Suite, Apt. #, etc. * 527		DO NOT WRITE IN THIS SPACE		
City & State HIAMI Bouch FL	City & State MIAMI BRUGH	.Fi	4. FEI Number 65-0268333	Applied For Not Applicable	
Zip Country 33141 DAOE 6. Name and Address of Current R		Country DASE	Fee Req	Additional uired	
al rest of the second s	egistered Agent	Name C	7. Name and Address of New Registered Agent		
DAVID FINELSTEIN PA ONE NE 2ND AVE STE 200			ess (P.O. Box Number is Not Acceptable)		
MIAMI FL 33132		City MIA	ny Breid FL 302	Code 14/	
8. The above named entity submits this statement for	the purpose of changing its re	egistered office or reg	gistered agent, or both, in the State of Florida.		
SIGNATURE Signature, typed or printed name of registered agent an	Angle Day d title if applicable. (NOTE: F	Promas + Registered Agent signature re	equired when reinstating) DATE	·	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. 4 (See criteria on back)	I .	FEE IS \$150.00 Pree will be \$550. To Department of	•00 Trust Fund Contribution	5.00 May Be ded to Fees	
11. OFFICERS AND D	IRECTORS Delete	12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTION		_
NAME STREET ADDRESS CITY-ST-ZIP DAN, SAM 611 LINCOLN ROAD STE 201 MIAMI BEACH FL 33139	ш оене	NAME STREET ADDRESS	DAN, SAMUAL 100 713+ Street #507 Minni Dand, Ft 35141	ge Addition (5)) jo to 01
TITLE D NAME KARP, KOBI	☐ Delete	TITLE D	Chan	ge 🗆 Addition 👸	ב כ
STREET ADDRESS CITY-ST-ZIP 611 LINCOLN ROAD STE 201 MIAMI BEACH FL 33139		STREET ADDRESS TO STREET ADDRESS STR	1100 (011 in) Aug, Suite # 200 unny Toles Fr 33160		
-TITLE - =	Delete - : :	NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	ge Addition	
TITLE SAME NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chanç	ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e Addition	
of the corporation or the receiver or trustee empore suppresential report is true for the corporation or the receiver or trustee empore changed, or on an attachment with an address, with SIGNATURE:	ue and accurate and that my ered to execute this report as	signature shall have required by Chapter	n Section 119.07(3)(i), Florida Statutes. I further certify that the same legal effect as if made under cath; that I am an office 607, Florida Statutes; and that my name appears in Block 11 4/2/02 305-864-Dayline Phone	er or director For Block 12 if	