FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Jun 02, 2003 8:00 am Secretary of State

	06-02-2003	90197	041	***1	50.	00
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DOCUME 1. Entity Name	INT # P0000	00087122
		GROUP. INC



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3. Mailing Address	007	_				
Suite Apt. #, etc. Suite Apt. #, etc.			DO NOT WRITE	E IN THIS SPA	ACE	
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		City 77 7	2	FL	Zip Code	1
the purpose of changing its	s registere	ed office or register	ed agent, or both, in the State of Flor	ida. I am fami	liar with, and accept	1
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his filing does not qualify fo	of depletions.	第500年度中央中央企業的企業。 1900年度	ction 119.07(3)(i), Florida Statutes, I	further certify	that the information	
	3. Mailing Address SSP DNN Super Apt, #, etc. City & State FL Zip 330 78 RITE ACE State Indicate I	IN THIS SPACE 3. Mailing Address Suite, Apt, #, etc. City & State Fig. Zip 33078 Cour Charle if applicable. (NOTE: Registers) State ITEL NAM STRE CITY TITLE TITLE	IN THIS SPACE 3. Mailing Address Suite, Apt, #, etc. City & State Fi. Zip 330 78 Country City & State Fi. Zip 330 78 Country City 330 78 Country City 330 78 Country City 330 78 City 330 78 International City 330 72 International City 330 72 International City 330 72 International City 37 72 International Cit	IN THIS SPACE 3. Mailing Address ISP 2000 PT Sure, Apt. #, etc. City & State City & State Country S. Certificate of Status Desired 7. Name and Address of Current I Name SHACE RITE ACE City 330 78 Country S. Certificate of Status Desired 7. Name and Address of Current I Name SHACE Parabolic Proces Street Address (PO-Bou-Numpar: in-Not: Acceptable) Parabolic Proces In the purpose of changing its registered office or registered agent, or both, in the State of Flor City 330 78 In the purpose of changing its registered office or registered agent, or both, in the State of Flor City 370 78 In the purpose of Current I NAME SIREF ADDRESS CITY ST-2P IN L. NAME SIREF ADDRESS CITY ST-2P IN THIS S SIREF ADDRESS CITY ST-2P IN L. NAME SIREF ADDRESS CITY ST-2P IN L. NA	IN THIS SPACE 3. Mailing Address Supe Apt # ep. DO NOT WHITE IN THIS SPACE	IN THIS SPACE 3. Mailing Address Septe App #, etc.

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 on an attachment with an address, with all other large empowered.

SIGNATURE:

AGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment#

90123610 P00000081122

The Reason I DID NOT SOND MY FEE and App. in I DID NOT GET MY U.B.P. for 2003. I Recently Received A Copy and I'm sending The App. with Thank your John Carson pembrolo Pines Florido 35028 14 951-438-7237 (eli 951-444-1046