ŀ	ILLEL)	
Aug 21,	2001	8:00	am
Secret	ary of	f Stat	e

1. Entity Nan		00090995			Se	ecretar	y of State	e	
1331 SOUTH UNIT #11B	Principal Place of Business 1331 SOUTH DIXIE HIGHWAY UNIT #11B POMPANO BEACH FL-33067 Mailing Address 1331 SOUTH DIXIE HIGHWAY UNIT #11B POMPANO BEACH FL 33067		٠ ڪرڀ -		1480 14	4 NA 87NA 88NA 88NA 8	III 1000 ÎNDA INIO 1150 ÎND		
Principal Place of Business 3. Mailing Address									
Suite, Apt.	uite, Apt. #, etc. Suite, Apt. #, etc.			DO NO		DO NOT WRI	OT WRITE IN THIS SPACE		
City & Star	te	City & State		4.	4. FEI Number 65 1042 199 Applied For Not Applied be				
Zip	Country	Zip	Country	5.	. Certificate	of Status Desired	\$8.75 Ad Fee Require	ditional	
	6. Name and Address of Curren	t Registered Agent	Name	7.	Name and	Address of New F			
SPIEGEL :	& UTRERA, P.A.				ARD	HUJDO			
	RIA AVENUE		Street A		Box Numbe	r is Not Acceptable	e) 		
CORAL G	ABLES FL 33134				- 6,,,=				
زیا		•	City	OMPI	ANO	BBOCH	4 FL Zip Cod	567	
8. The above	named entity submits this statement f	or the purpose of changing its r	 =					707	
ļ	Red St	-5 02		•				}	
SIGNATURE	Signature, hyperdor printed name of registered agen	t and title if applicable. (NOTE:	Registered Agent signar	ture required when	n reinstating)		DATE	·····	
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$550.00 After September 12, 2001 Fee will be \$750.00 Make Check Payable to Department of State 10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees									
11.	OFFICERS AND		12.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	PSTD HUDDUS, RYSZARD J 1331 SOUTH DIXIE HIGHWAY POMPANO BEACH FL 33067	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST D HUDE 1331	105 , XIO 2	RYSZA IE HUY BEACH	Change RD 32067	☐ Addition	
TITLE		☐ Delete	TITLE	PUMP	HNO_	DEACH	Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					<i>'</i>	
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS		,			}	
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE NAME		☐ Delete	TITLE NAME				☐ Change	Addition	
STREET ADDRESS			STREET ADDRESS					}	
CITY-ST-ZIP	<u> </u>	Delete	CITY-ST-ZIP	 			☐ Change	Addition	
NAME		LI Delete	TITLE NAME	}				∠ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS)	
TITLE		☐ Delete	TITLE	 			☐ Change	Addition	
NAME expert apporce			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	1				}	
13. Lhereby	certify that the information supplied wit	h this filing does not qualify for t	he exemption sta	ted in Section	n 119.07(3)(i)), Florida Statutes.	further certify that the in	nformation	

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2001 UNIFORM BUSINESS REPORT (UBR)

RYSZARD HUJOUS

08-15-0

Daytime Phone #