County         County<	2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P00000095969 1. Entity Name					FILED Feb 08, 2001 8:00 am Secretary of State		
HI, JON HOX RD, STE 20 TALLAHASSEE R, 3230       ZE JON HOX RD, STE 20 TALLAHASSEE R, 3230       JUNE HOX RD, STE 20 TALLAHASSEE R, 3230         2. Phologial Place of Business       3. Mailing Address of Down April 4, etc.       Suite, April 4, etc.       Down Y         2. Phologial Place of Business       3. Mailing Address of Down Y       Country       Down Y         2. Phologial Place of Business       3. Mailing Address of Down Y       Down Y       Processory         2. Phologial Place of Business       Country       Country       Stell Address of How Registered Agent         2. Phologial Place of Business       Country       Country       Stell Address of How Registered Agent         2. The above numed entity wohnits this sciences for the purpose of charging its registered Afee or touch, in the State of Toucia.       Stell Address of How Registered Agent         Proc. J. RUSSEL       Stell Address of Country in the State of Toucia.       Stell Address of How Registered Agent         Proc. J. RUSSEL       Stell Address of Country in the State of Toucia.       Stell Address of How Registered Agent         Proc. J. RUSSEL       Stell Address of Country in the State of Toucia.       Stell Address of How Registered Agent         Proc. J. RUSSEL       Touchrward antity wohnits this sciences for the purpose of charging Registered Afee or touch, in the State of Toucia.       Stell Address of How Registered Acent         State Chow Registere Address of Or HOK RES AND UPECONE	GUUSE	CHEEK DEVELOPERS, INC.		<u>ل</u> ه ۲۰	}			
ALLAHASSEE FL 2200       TALLAHASSEE FL 2200         2. Principion Place of Busineses       3. Molling Address         30/b, Apl. A. etc.       Suite, Apl. A. etc.         City & Statu       Do 'NOT WRITE IN THIS SPACE         ZP       Country       Zite         Country       Country       Statu Deskel         ZP       Country       Statu Deskel         ZP       Country       Statu Deskel         ZP       Country       Statu Deskel         ZH       Country       Statu Deskel         ZH       Country       Statu Deskel         ZH       Country       Statu Deskel         ZH       Down NHOX RD, STE 200       TatueAHASEE FL 3200         TatueAHASEE FL 3200       Down NHOX RD, STE 200       TatueAHASEE FL 3200         TatueAHASEE FL 3200       Down NHOX RD, STE 200       Down NHOM RESSEE FL 32000         The adopter humon on axit       Down NHOX RD, STE 200       Down NHOX RD, STE 200         The adopter humon on axit       Down	Principal Pla	ce of Business	Mailing Address					
Suite, Apt, III, etc.     DU NOT WRITE IN THIS STACE       City & State     City & State       City & State     Country       2P     Country       2P     Country       5. Name and Address of Current Registered Agent     Name and Address of New Registered Agent       PRICE, J. RUSSELL     Name and Address of Current Registered Agent       PRICE, J. RUSSELL     Name and Address of Current Registered Agent       PRICE, J. RUSSELL     Name and Address of Current Registered Agent       PRICE, J. RUSSELL     Name and Address of Current Registered Agent       PRICE, J. RUSSELL     State Registered Agent       PRICE, J. RUSSELL     State Registered Agent       PRICE, J. RUSSELL     City       R. The above numed entry submits this statement for the purpose of changing Rs segletared agent or topoly in Find Contribution       State Registered Agent and the registered agent admits frage and the find agent admits frage and the registered agent or topoly in Find Contribution       State Registered Agent and the registered agent admits frage and the registered agent or topoly in Find Contribution       State Registered Agent and the registered agent admits frage and the registered agent or topoly in Find Contribution       State Registered Agent and the registered agent admits frage and the registered agent or the registered agent or topoly in Find Contribution       State Registered Agent and the registered agent admits frage and the registered agent or topoly in Find Contribution	141 JOHN KNOX RD. STE 200 TALLAHASSEE FL 32303					U	L V	
City & State       City & State       4. FEI Number       Applied Fir         ZP       Country       2.0       State Address of Current Registered Agent       State Address of New Registered Agent         PRCE_J_RUSSELL       2.1 OPN KNOX R0, STE 200       TALLAHASSEE FL 32030       TALLAHASSEE FL 32030       City       FL       Zit Code         State Address of Current Registered Agent       Name       TALLAHASSEE FL 32030       City       FL       Zit Code         State Address of New Registered Agent       Name       TALLAHASSEE FL 32030       City       FL       Zit Code         State Address (P.O. Daw Namber is Not Acceptable)       TALLAHASSEE FL 32030       City       FL       Zit Code         State Address (P.O. Daw Namber is Not Acceptable)       TALLAHASSEE FL 32030       City       FL       Zit Code         State Address (P.O. Daw Namber is Not Acceptable)       TALLAHASSEE FL 32030       Total Found Address of New Registered Agent       Address of New Registered Agent         State Address (P.O. Daw Namber is Not Acceptable)       Tate Address of New Registered Agent       Address New Registered Agent       Address New Registered Agent         State Address (P.O. Daw New Registered Agent Agent Address of New Registered Agent       Mate Address New Registered Agent       Address New Registered Agent       Address New Registered Agent         State Address (P.O.	2. Principal	Place of Business	3. Mailing Address					
29       Country       29       Country       5. Centricate of Status Desired       Status Desired Agents       Proceedings of the status Desired Agents       Name       Status Desired Agents       Status Desired Agents       Status Desired Agents       Difference       Status Desired Agents       Difference       Status Desired Agents       Difference       Status Desired Agents       Difference       Dif	Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
Country     C	City & Sta	te	City & State		4. FE	Number	⊢	· · · · · · · · · · · · · · · · · · ·
S. Name and Address of Current Registered Agent     T. Name and Address of New Registered Agent     T. Name Address     T. Name A	Zip	Country	Zip			• •	<b>\$8.75</b> Add	ditional
PRICE, J. RUSSELL 211 JOHN KNOX RD, STE 200 TALLAHASSEE F. 3203       Street Address (P. O. Box Number is Not Acceptable)         City       FL       Zie Code         City       FL       Zie Code         8. The above named entity submits this statement for the purpose of changing its registered diffice or registered again, or both, in the State of Florida.       DetC         SIGNATURE		6. Name and Address of Current I	Registered Agent		7. Na		- ree.nequire	•d
241 JOHN KNOX RD, STE 200       Street Address (P.U. Box Rumber's Not Addressie)         City       FL       Zip Code         City       FL       Zip Code         City       FL       Zip Code         City       FL       Zip Code         Street Address (P.U. Box Rumber's Not Addressie)       Dete         City       FL       Zip Code         Street Address (P.U. Box Rumber's Street Addressie)       Dete         This corporation is eligible to satisfy its Intergible       FILE NOW!!! FEE IS \$150.00 Atter MAY 1, 2001 Fee will be \$500.00 Malce Check Payable to Department of street Addression       Dete         10.       City       FLE NOW!!! FEE IS \$150.00 Atter MAY 1, 2001 Fee will be \$500.00 Malce Check Payable to Department of street Addression       Dete         11.       OFFICERS AND DIFECTORS       12.       ADDIFICIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11         12.       OFFICERS AND DIFECTORS IN 11       Change (PAddito Street Addression)         13.       OFFICERS AND DIFECTORS       12.       ADDIFICIONS/CHANGES TO OFFICERS AND DIFECTORS IN 11         14.       OHAC Check Payable to Department of street Addression       Check Payable to Department of street Addression         14.       OHAC Check Payable to Department of street Addression       Check Payable to Payable to Addression (PA: 5: 2)         15.       OHA	00%			Name				
City       FL       Zin Code         B. The above numed entry submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida.         SIGNATURE       Signature syndroment and allocits to do so.       PRICE Insglered Agent syndromentation and printerfamore insplatered agent and text splatered.       PRICE	241	JOHN KNOX RD, STE 200		Street Addres	s (P.O. Bo)	(Number is Not Acceptable)		
				City				
SIGNATURE       This corporation is eligible to satisfy its intangible       FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Marker MARKER MAY 1, 2001 Fee will be \$550.00 Marker MARKER MARKER S 211 JOHN KNOX RD, STE 200 GIV-\$1.20 Marker MARKER S 20 GIAZVINI, MEHRAN MARKER GHAZVINI, MEHRAN MARKER MARKER S 20 GIAZVINI, MEHRAN MARKER MARKER MARKER S 20 GIAZVINI,					<u> </u>			
(See criteria on back)       Make Check Payable to Department of State       International Control Contrector Contrest Contrector Contro Control Contented Co	9. This corp	Signature, typed or printed name of registered agent a oration is eligible to satisfy its Intangible	FILE NOW!	!!! FEE IS \$150.00		10. Election Campaign Financia	ng <b>\$5.0</b>	
Imme       D       Delete       TmLE       MAME       Change       Addition         Make       PRICE, J. RUSSELL       Immediate       Immediate <t< th=""><th>(See crite</th><th>eria on back)</th><th>Make Check Payat</th><th>ble to Department of S</th><th>State</th><th></th><th></th><th></th></t<>	(See crite	eria on back)	Make Check Payat	ble to Department of S	State			
Implementation       Delete       TITLE       Change       Addition         WANE       GHAZYINI, HOSSEIN       NAME       STREET ADDRESS       Change       Addition         STREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       Change       Addition         CITY-S1-2P       TALLAHASSEE FL 32303       CITY-S1-2P       Change       Addition         ITTLE       Delete       TITLE       Change       Addition         MAME       GHAZXINI, BEHZAD       STREET ADDRESS       Change       Addition         STREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       Change       Addition         STREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       Change       Addition         STREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       Change       Addition         STREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       TITLE       Change       Addition         MAME       GHAZXINI, MEHRAN       STREET ADDRESS       STREET ADDRESS       TITLE       Change       Addition         MAME       GHAZXINI, MEHRAN       STREET ADDRESS       STREET ADDRESS       STREET ADDRESS       TITLE       Change       Addition         MAM	TITLE NAME STREET ADDRESS	D PRICE, J. RUSSELL 241 JOHN KNOX RD, STE 200	·=	TITLE NAME STREET ADDRESS	ADUI	TIONS/CHANGES TO OFFICER		Addition
THE       D       Delete       TITLE       Change       Addition         TREET ADDRESS       241 JOHN KNOX RD, STE 200       STREET ADDRESS       CITY-ST-ZP       Change       Addition         TALLAHASSEE FL 32303       CITY-ST-ZP       TALLAHASSEE FL 32303       CITY-ST-ZP       Change       Addition         MARE       GHAZVINI, MEHRAN       Delete       TITLE       Change       Addition         MARE       GHAZVINI, MEHRAN       Delete       TITLE       Change       Addition         TALLAHASSEE FL 32303       Delete       TITLE       Change       Addition         TALLAHASSEE FL 32303       Delete       TITLE       Change       Addition         TALLAHASSEE FL 32303       Delete       TITLE       Change       Addition         MARE       GHAZVINI, MEHRAN       NAME       STREET ADDRESS       CITY-ST-ZIP       TALLAHASSEE FL 32303       CITY-ST-ZIP         TREET ADDRESS       241 JOHN KNOX RD, STE 200       TITLE       NAME       Change       Addition         MARE       GHAZVINI, MEHRDAD       TITLE       NAME       Change       Addition         MARE       CHANES       STREET ADDRESS       CITY-ST-ZIP       CITY-ST-ZIP       CITHER ADDRESS       CITY-ST-ZIP       CITHER ADD	ITLE IAME ITREET ADDRESS	D Ghazvini, Hossein 241 John Knox RD, Ste 200	Delete	TITLE. NAME STREET ADDRESS			Change	Addition
Intel       D       Delete       ITTLE       Change       Additio         IMME       GHAZVINI, MEHRAN       NAME       STREET ADDRESS       STREET ADDRESS       CITV-ST-ZIP       Intel	TITLE IAME STREET ADDRESS	D Ghazvini, Behzad 241 John Knox RD, Ste 200	Delete	TITLE NAME STREET ADDRESS			Change	Addition
Image       GHAZVINI, MEHRDAD         ITREET ADDRESS       241 JOHN KNOX RD, STE 200         ITREET ADDRESS       STREET ADDRESS         ITTY-ST-ZIP       TALLAHASSEE FL 32303         ITTLE       Delete         ITTLE       ITTLE         IAME       STREET ADDRESS         ITTLE       Delete         ITTLE       ITTLE         IAME       STREET ADDRESS         ITTLE       ITTLE         IAME       STREET ADDRESS         ITTY-ST-ZIP       ITTLE         IS. 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 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 of the receiver or furstee empowered to execute the report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 it changed, or on an attachment with an address, with all other like empowered.		D Ghazvini, Mehran 241 John Knox RD, Ste 200	Delete	NAME STREET ADDRESS			☐ Change	Addition
NAME STREET ADDRESS SITY-ST-ZIP 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 frustee 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.		TALLAHASSEE FL 32303						Addition
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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 il changed, or on an attachment with an address, with all other like empowered.	CITY-ST-ZIP ITLE IAME ITREET ADDRESS	D Ghazvini, Mehrdad 241 John Knox RD, Ste 200	Delete	NAME STREET ADORESS				
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