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

P00000105328

DOCUMENT#

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FILED May 01, 2003 8:00 am Secretary of State 05-01-2003 90818 031 ***150.00

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	Place of Business	3. Mailing Address	7		
	Coral Springs Dr.	4337 Coral S	springs Dr.	=	
Suite, Apt		Suite, Apt. #, etc.		DO NOT WRITE IN THI	IS SPACE
Apt. City & Sta		Apt. 1H City & State		4. FEI Number	Applied For
•	Springs. Fl	Coral Spring	va El	65-1059569	Not Applicable
Zip	Country	Zip	Country		\$8.75 Additional
33065	Broward	33065	Broward	5. Certificate of Status Desired	Fee Required
				7. Name and Address of Current Register	red Agent
			NamAlic	ia M. Craton	
DO NOT WRITE				s (P.O. Box Number is Not Acceptable)	
			4337 C	4337 Coral Springs Dr Apt. 1H	
IN THIS SPACE					
			City		7in Codo
			Coral	City Coral Springs FL Zip Code 33065	
8. The above named entity submits this statement for the purpose of changing its registered				stered agent, or both, in the State of Florida.	
-					
SIGNATURE					
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered Agent signature requ	pired when reinstating) DATE	
9. This corp	oration is eligible to satisfy its Intangible		ay 1 Fee is \$150.00		
Tax filing requirement and elects to do so. Amended 1			1, Fee is \$550.00	10. Election Campaign Financing	\$5.00 May Be
(Can auto				1 Trust Fund Contribution	Added to Econ
(See Citte	ria on back):		। UBK ।S ३७1.25 le to Department of S	Trust Fund Contribution,	Added to Fees
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indicated on this report or supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Alicia M. Craton SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR