FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000 112428

1. Entity Name
PARDICK ENTERPRISES, INC.

FILED Apr 29, 2002 8:00 am Secretary of State

04-29-2002 90146 049 ***158.75

DO	NOT	WRIT	E IN	THIS	SPACE
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2. Principal Place of Business 4711 SW42 TERRACE		3. Mailing Address 4711 SW42nd TEKRACE								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
City & State	audei	dale, Florida	City & State FT. Lauderd			FEI Number (65-1063347	Applied For Not Applicable			
^{Zip} 333	14	Country US A	^{Zip} 33314	Country USA	5.	Certificate of Status Desired	\$8.75 Additional Fee Required			
000	<u> </u>			Name	7. N	7. Name and Address of Current Registered Agent				
	ח	O-NOT-WI	PITE	E	12al	Box Number is Not Acceptable)				
				Street Addit	Street Address (P.O. Box Number is Not Acceptable) 47//SW 42 NL TERRACE					
	I	N THIS SPA	ACE							
				PL Cauderdale - 33319						
8. The above named earing submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.										
SIGNATURE State M. M. Market M. Pardick President 4-16.02										
SIGNATURE Signature required when reinstating) DATE										
9. This corporation is eligible to salisfy its intangible After May 1,			1 Fee is \$150.00 Fee is \$550.00		10. Election Campaign Financing	\$5.00 May Be				
			JBR is \$61.25	f State	Trust Fund Contribution.					
11.		OFFICERS AND D								
TITLE	Pre	esident	lick	TITLE		•				
NAME -				NAME STREET ADDRESS						
STREET ADDRESS CITY-ST-ZIP	4711	SW42 TERRA	1 223/4	CITY-ST-ZIP						
TITLE	1/100	President	()))),	TITLE						
NAMÉ	-	. A Dardice	Ł.	NAME			18			
STREET ADDRESS	£/ * 7	11. Can seal 1 4-15-15		STREET ADDRESS			Ì			
CITY-ST-ZIP	F	Lauderdale, F	-1 33314	CITY-ST-ZIP						
TITLE	-	PEACURED		TITLE			l			
NAME	EI	170 both m. Hall	Lick	NAME						
STREET ADDRESS	47	7/1 SW42 TERN	Z// CL.	STREET ADDRESS		DO NOT WR	ITF			
CITY-ST-ZIP		tlouderdole	,1-1-3-3-314	_CITY=ST-ZiP						
TITLE	હદ	CRETARY ames & Para	15.6	TITLE		IN THIS SPA	CE			
NAME	V	ames & Para	ICK ODBO	NAME			-			
STREET ADDRESS	4	7/15W421EKM	nee	STREET ADDRESS			Ì			
CITY-ST-ZIP	Æ	et landerda	e, FI 33314	CITY-ST-ZIP						
TITLE				TITLE			,			
NAME				NAME expect appress			•			
STREET ADDRESS				STREET ADDRESS CITY-ST-ZIP						
CITY-ST-ZIP										
TITLE				TITLE						
NAME				NAME STREET ADDRESS						
STREET ADDRESS				CITY-ST-ZIP						
CITY-ST-ZIP	l		this fills a shoot and so said to fee a		in Section	n 119.07(3)(i), Florida Statutes. I further of	ertify that the information			
13. I hereby of indicated	certify that the on this repo	ne information supplied with ort or supplemental report is the acceptor of this tee empty	tries tiling does not quality for t true and accurate and that my pwered to execute this report	ne exemption stated r signature shall have as required by Char	e the same oter 607. F	e legal effect as if made under oath; that I Florida Statutes; and that my name appea	am an officer or director ars in Block 11 or on an			

Flizabeth M. Paidick/PRES 4-15-02 954-257-1018
Date Date Dayline Phone #