

FILED
Apr 28, 2003 8:00 am
Secretary of State

02002610 AV/

[illegible]☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-1067459	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

FL Zip Code

ed agent, or both, in the State of Florida. I am familiar with, and accept

SIGNATURE _____
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

10.	OFFICERS AND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
-----	------------------------	-----	---

CR2E034 (10/02)

SIGNATURE: *MICHAEL R. S. [Signature]* **REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

(954) 771-2948