## FILED Apr 02, 2002 8:00 am Secretary of State

## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Not A   Zip   Country   SA   Zip   Country   S. Certificate of Status Desired   \$8.75 Addition Fee Required   \$8.75 Addition	Applied For Not Applicable sess of Current Registered Agent  Not Acceptable  FL Zip Code 173	DO NOT WRITE  4. FEI Number 65 - 109 06 15  5. Certificate of Status Desired  7. Name and Address of Current R	IN THIS SPACE  3. Mailing Address Suite. Apt. #. etc. City & State	E INC  RITE IN  Suit	DO NOT WRIT	1. Entity Nam
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2. Principle of Secretary  Suite, Apr. #, stoc.  Suite, Apr. #, stoc.  City & State  April 1	Applied For Not Applicable sess of Current Registered Agent  Not Acceptable  FL Zip Code 173	DO NOT WRITE  4. FEI Number 65 - 109 06 15  5. Certificate of Status Desired  7. Name and Address of Current R	3. Mailing Address Suite. Apt #. etc. City & State	3. Ma	Place of Business	į
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MATHALIE DIE RICEX  DO NOT WRITE  IN THIS SPACE    Name and Address of Current Registered Agent   Street Address of Current Registered Agent Registered Agent Registered Agent Registered Agent Register	Not Applicable  \$8.75 Additional Fee Required  ess of Current Registered Agent  Not Acceptable  FL Zip Code 173	5. Certificate of Status Desired  7. Name and Address of Current R		City	t. #, etc.	Suite. Apt.
Shifts above named entity submits the statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Fichical In This soprocration is elaptic to substity the intemplate Institute of Institute of Institute Institu	Fee Required ess of Current Registered Agent    C   C   C   C	7. Name and Address of Current R	Zip Country	0.0	A FI	City & State
To Name and Address of Current Registered Agent    Set   Color   Color	Not Acceptably)  FL Zip Gods 173	SEAN C. DIER		A Zip	Country SA	Zip 3 1
DO NOT WRITE IN THIS SPACE  Street Address IP 0. Box Number is Not Acceptably in the purpose of changing its registered office or registered agent, or both, in the State of Florido.  Gray M A FL 7p 3033  In the above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florido.  In this corporation is eligible to satisfy its intendible in the state of State of State of Florido.  In this corporation is eligible to satisfy its intendible in the state of	FL Zip Code 173	JEAN C. DIER	Nan-			<u> 3 9 1</u>
The above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florida.    City M   A   FL   Zip 2003	FL Zip God \$173	t Address (P.O. Box Number is Not Acceptable)		T WRIT	DO NOT	-
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And the above named entity submits this statement for the purpose of changing its registered affice or registered agent, or both, in the State of Florido.    Signature   Parameter or registered agent, or both, in the State of Florido.		MIA	City			
D. This corporation is eligible to satisfy its intengible lax filing requirement and elects to do so. (See criteria on back)  The post post part of the property of the proper	·	<u> </u>	he purpose of changing its registered offic	tatement for the purp	e named entity submits this stateme	. The above
Description is eligible to satisfy its intengible tax filing requirement and elects to do so.    See criteria on back    Section	2-19-02		2	at	100	SIGNATURE .
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I. I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an efficer or of the corporation or the receiver or another empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or attachment with an address, with an effect like empowered.	orida Statutes. I further certify that the information		M · · · ·	polied with this filing	certify that the information supplied	