FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04 JAN 15 PH 12: 29 P01000016753 **DOCUMENT#** SECRETARY OF STATE TALLAHASSEE FLORIDA D+P Contracting DO NOT WRITE IN THIS SPACE Mailling Address S. Flamingo Rd DO NOT WRITE IN THIS SPACE Applied For 4. FEI Numbe (05-Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of Current Registered Agent Name DIW. DO NOT WRITE IN THIS SPACE ooser 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fforida. 1 Millitina January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be After May 1, Fee is \$550.00 Election Campaign Financing Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE PRES CR2E034B (12/01) Thomas Dimatina NAME NAME 22 5. Flamingo Rd Cooper City Fl 333 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP **300027527873** 01/26/04--01005--011 **150.00 TITLE NAME NAME pingord STREET ADDRESS STREET ADDRESS F 3333 CITY-ST-ZIP City - ST - ZIP Thomas Dimatting 5. Flamingo Rd TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS 00 per City. Fl 33330 DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE ec. NICK Pipitone NAME NAME 57225 Flamingo Rd STREET ADDRESS STREET ADDRESS Cooper City CITY-ST-ZIP CTTY - ST - ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CTY-ST-7IP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 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 altority like emprowered.

FILED

Thomas Dimatina, 1/14/04 954-436-90160

Daytime Phone #