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

FILED Jan 24, 2002 8:00 am Secretary of State

DOCUMENT # \$\text{P01000024610}					01-24-2002 90002 041 ***150.00		
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2. Principal Place of Business 3. Mailing Address 118 LAKE Emery[] Dr				1.			
Suite, Apt. #, etc. Suite, Apt. #, etc.			19110 DIC	DO NOT WRITE IN THIS SPACE			
City & State	woon , FL	Sity & State OAK And PA	nh, PL	4. FE	Number 65 - 1098734	Applied For Not Applicable	
Zip 3 4	20 Country	^{Zip} 33309	Country	5 . Ce		8.75 Additional ee Required	
7. Name and Address of Current Registered Agent Name 0							
DO NOT WOITE					Z-AVAY-AN		
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	IN THIS SP	ACE					
			City //	1/24	συη FL	Zip Code	
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 Florida.							
1/17/02							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 May Fee s \$150.00 After May Fee s \$550.00 Amended UBR s \$61.25 Make Check Payable to Department of State							
11.	OFFICERS AND		Control of the State of the Sta				
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CITY - ST - ZIP	Hollywood, PC 3	3020	CITY-ST-ZIP			- }	
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	t certify that the information supplied with	this filing does not qualify for		in Section 11	9.07(3)(i), Florida Statutes. I further certif	y 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: :

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR