2002	UNIFORM	BUSINESS	REPORT	(UBR

DOCU 1. Entity Nar SUB DEI		P0100	0029583				FILED		
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3400 PERIWI	ice of Business INKLE CT. APT 201 H GARDENS FL 33410		Mailing Address 3400 PERIWINKLE CT. AI PALM BEACH GARDENS	=	<u>.</u>	SECF TALLA	ETARY OF S HASSEE, FL	STATE ORIDA	18388 1114 18 8 3
2. Principal I	Place of Business	. 1	3. Mailing Address						
Suite, Apt	t. #, etc.	thing	Suite, Apt. #, etc.	<u>.</u>			TA A TA DES	CE 0.0	7
City & Sta	Waln Bouch	FL	City & State			FEI Number 1897284	 {		plied For t Applicable
334	Sountr Vila	mbeach	_ Zip	Country		Certificate of Status Desired	□ \$8	. 75 Add Required	itional
	6. Name and Add	ress of Current R	egistered Agent	Name	7.	Name and Address of New	Registered Age	nt	
KULBACI	KY, MARK								
	RIWINKLE CT, APT 2	01		Street Ac	ldress (P.O. E	Box Number is Not Acceptab	ole)		
PALM BE	EACH GARDENS FL	33410							
				City		19-14.	FL	Zip Code)
8. The above	e named entity submits	this statement for t	the purpose of changing its	registered office or	registered ag	gent, or both, in the State of F	lorida. I am fami	liar with,	and accept
the obligat	itions of registered ager	this statement for t	the purpose of changing its	registered office or	registered ag	gent, or both, in the State of F	lorida. I am famí	liar with,	and accept
8. The above the obligat	itions of registered ager	illowy	mak Ked	registered office or			Plorida. I am famí	liar with,	and accept
the obligated strong the strong three strong	itions of registered ager	me of registered agent and	Little if applicable. (NOTE	E: Registered Agent signatur	e required when re	reinstating) 10. Election Campaign F	DATE	\$5.00	May Be
signature 9. This corporate filing (See criter)	Signature, typed or printed nar oration is eligible to sati requirement and elects tria on back)	int. Interest registered agent and state of registered agent agen	FILE NOW! After September 13 Make Check Payab	E: Registered Adent signature!! FEE IS \$550.0	e required when re	reinstating)	DATE inancing	\$5.00	
signature 9. This corporate filing (See crite) 11.	Signature, typed or prived nar oration is eligible to sati requirement and elects eria on back)	ne of registered agent and isfy its Intangible to do so.	FILE NOW! After September 13 Make Check Payab	E: Registered Agent signature!! FEE IS \$550.0, 2002 Fee will be ble to Department	e required when re \$750.00 of State	reinstating) 10. Election Campaign F	DATE inancing on. FICERS AND DIF	\$5.01 Added	May Be to Fees
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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 Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: WORLD SIGNATURED

10/1/10 516-833-8988