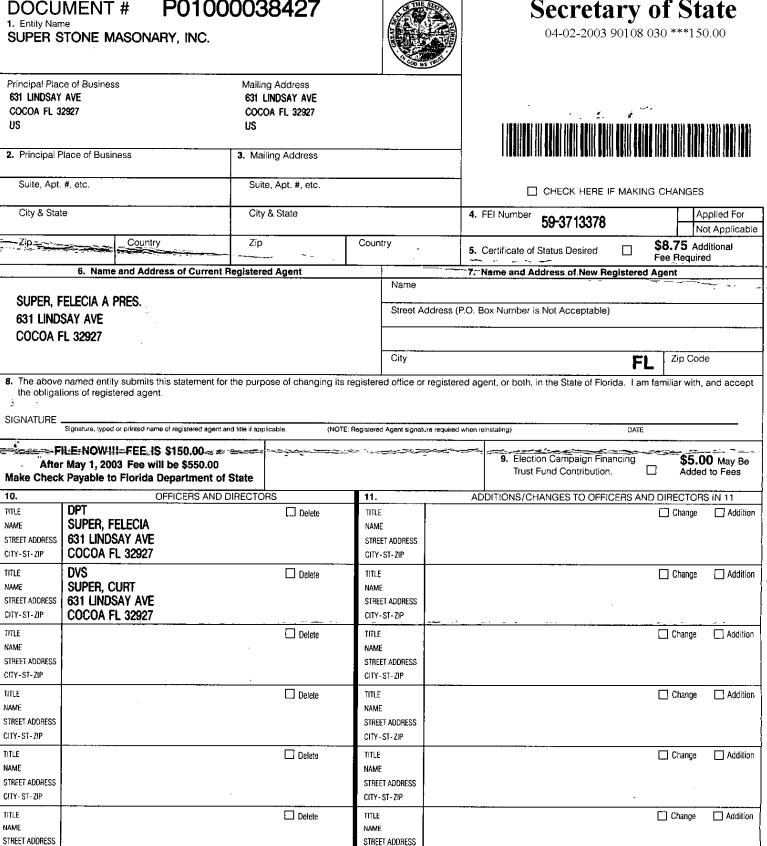
Apr 02, 2003 8:00 am Secretary of State

DOCUMENT #	P01000038



12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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 regeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or on an attachm address, with all other like empowered

CITY-ST-ZIP

CITY-ST-ZIP

14/03 321-636-4318

Date Daytime Phone #