FILED Jul 02, 2002 8:00 am Secretary of State

U	NIFORM BUSINE	SS REPORT	r (VBR)	05-28-2002 91754 050 ***150.	00
DOCU	MENT # P01000				
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	DO NOT WRITE	IN 1HI2 2	PACE		
6 District	Name of O. classes	3 Mailing Address		<u>- </u>	
4400	HULLOUSH Drive	3. Mailing Address			
Suite, App	Peic #517	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & Stat	le and TI	City & State		4. FEI Number Applier	d For
HOW	ywood, th			92 110 -	plicable
²⁷ 230	21 COURSA	Zip	Country	5. Certificate of Status Desired	lal
		· · · · · · · · · · · · · · · · · · ·		7. Name and Address of Current Registered Agent	
	DO NOT W	DITE	Name	ora-Rossi	
	DO NOT W		Street Add	ress (P.O. Box Number is Not Acceptable)	
	IN THIS SP	ACE	4400	Hulcrest Drive # 517	Ì
			CINTY	WWOOD FL 3302	77
The above					
	a named entity submits this statement for	the purpose of changing if			
e, the addre	enamed entity submits this statement for	the purpose of changing it	a registered billed of re	gradient agent of them, when a second and a second	-
SIGNATURE					_
şignature	Signature: typod or printed name of registered agent as	nd the if applicable. (NO	TE: Programme Agent Square Way 1 Fee 15 \$150.0	secured where reshastingst DATE	
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