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

## FILED Aug 25, 2002 8:00 am Secretary of State 08-25-2002 90197 016 \*\*\*158.75

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<b>DOCUMEN</b>	NT# P	07-0000	64839
1. Entity Name	Club	DELUSION	میر. ك

SIGNATURE:

DO NOT WRITE IN THIS SPACE				B0134985	
2. Principal Place of Business 1/364 QUAI Roos DR Suite, Apt. #, etc. 3. Mailing Address 1/364 QUAI Ro Suite, Apt. #, etc.		ail Roost Da.	DO NOT WRITE IN THIS SPACE		
City & State		City & State M(AM(	F/	4. FEI Number Applied For Not Applied For Not Applicable	
33/57	Country S A	33157	Country A ·	5. Certificate of Status Desired \$8.75 Additional Fee Required	
DO NOT WRITE IN THIS SPACE  The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.					
SIGNATURE Signature, typed or planed name of registered agent angentia if applicable. (NOTE: Registered Agent signature required when reinstaling)  DATE  DATE					
Tax filling requirement and elects to do so. (See criteria on back)  After May 1, F Amended UI Make Check Payable t		ey 1 Fee is \$150.00 1, Fee is \$550.00 i UBR is \$61.25 le to Department of Sta	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees		
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	TENNY J PEREZ.	UR . SECKETARY.	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CR2E034B (12/01)	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		
13. I hereby co- indicated of of the corp	ertify that the Information supplied with the or this report or supplemental report is to the receiver or trustee emport with an address with all other like emports.	his filing does not qualify for true and accurate and that my wered to execute this report	the exemption stated in Se y signature shall have the as required by Chapter 6	ection 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 07, Florida Statutes; and that my name appears in Block 11 or on an	

Affa ChmeNt

# Polooo 64839

August 21, 2002

Florida Department of State Division of Corporations P O Box 1500 Tallahassee, FL 32302-1500

Dear Sir or Madam:

The enclosed UBR is been submitted at this time because the regular form was never delivered to us by the Postal Service.

Sincerely,

Pley Reg Veny V Penez Passident.