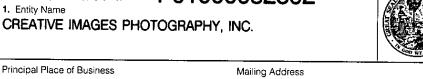
## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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## **FILED** Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90404 041 \*\*\*150.00

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Principal Place of Business 3. Maili		ailing Address				i <b>i i i i</b> i i i i i i i i i i i i i i	19 <b>111</b> 1111					
Suite, Ap	t. #, etc.	· <u></u>	Sui	te, Apt. #, etc.				_				
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City & State		City & State		4.	FEI Number <b>59-3740379</b>			pplied For ot Applicable	9			
Zip	Country Zip Co		Coun	try	5.	5. Certificate of Status Desired S8.75 Additional Fee Required						
	6. Name	and Address of Current	Register	ed Agent	<u>.                                    </u>		7.	Name and Address of New Re		•		┪
WILES, D	NANNE	***				Name						7
	LANTIC BOU	LEVARD				Street Address (P.O. Box Number is Not Acceptable)						
SUITE B					j			· · ·	<del></del> .			7
JACKSONVILLE FL 32211						City			FL	Zip Coo	le	$\frac{1}{2}$
8. The above	e named entity	y submits this statement for	the purp	oose of changing its	registere	d office or regi	stered ag	gent, or both, in the State of Flor		iliar with,	and accept	-
	J	area agana										
SIGNATURE		or printed name of registered agent a	nd title il app	olicable. (NOTE	: Registered	Agent signature req	uired when re	einstating)	DATE			
F	FILE NOW!!	FEE IS \$150.00				•						┪
		3 Fee will be \$550.00 Florida Department of	State					Election Campaign Fina Trust Fund Contribution.	incing		May Be to Fees	
10.		OFFICERS AND (	DIRECTO	I DRS	11.		Δ.	L DDITIONS/CHANGES TO OFFIC	SEDE AND DE	DECTOR	0.151.44	4
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12. I hereby certify that the information supplied with this filing 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 receiver 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 attachment with an address, with all other like empowered.

SIGNATURE:

1/8/02

904-805-8660