2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

May 30, 2002 8:00 am Secretary of State DOCUMENT # P01000098628 05-07-2002 90116 020 ***150.00 1. Entity Name EQUITY PARTNERS TEN. INC. Principal Place of Business Mailing Address 3696 N. FEDERAL HIGHWAY 3696 N. FEDERAL HIGHWAY 88212 SUITE 101 SUITE 101 FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1145150 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KAHAN, DAVID Street Address (P.O. Box Number is Not Acceptable) 3696 N. FEDERAL HIGHWAY SUITE 101 FT. LAUDERDALE FL 33308 City Zip Code FI 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Delete PSD TITLE Change 9/04 NAME NAME Danzansky, Bernard STREET ADDRESS 3696 N. Federal Hwy, Suite 101 STREET ADDRESS CR2E034 CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL 33308 TITLE ☐ Defete TIZLE ▼ Addition Kahan, David NAME NAME STREET ADDRESS 3696 N. Federal Hwy, Suite 101 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL 33308 TITLE .Defete. TITLE. __ Change __ Addition . NAME. تند. رسينين NAME Leon, Scott___ STREET ADDRESS STREET ADDRESS 3696 N. Federal Hwy, Suite 101 CITY-ST-ZIP CITY-ST-ZIP Ft. Lauderdale, FL 33308 TITLE □ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-71P CITY-ST-ZIP me ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 the property of the p

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957-568-1570