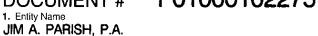
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P01000102275

1. Entity Name

SIGNATURE:





FILED Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90663 008 ***150.00

Daytime Phone #

Principal Place of Business 8510 DANBURY BLVD #201 NAPLES FL 34120			Mailing Address 8510 DANBURY BLVD #201 NAPLES FL 34120			- 				
2. Principal F	Place of Busin	ness	3. Mailing Address	s knæn	alo u) AV	- 			#8 0	
Suite, Apt. #, etc.			Suite, Apt. #, e) =	CHECK HERE IF MAKING CHANGES				
City & State			Naples Florida			4. FEI Number 59-3502650 Applied Fo Not Applie			oplied For ot Applicable	
Zip		Country	34120	Co	US A	5. Certifica	ate of Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent Name					
ROSS, DO	ONALD K J	R.								
-		PKWY., STE. 206	Street Address (P.O. Box Number is Not Acceptable)				
NAPLES (
	•				City			FL	Zip Code	e
	named entit tions of regist	y submits this statement fo lered agent.	rthe purpose of cha	nging its regis	tered office or registe	red agent, or	both, in the State of F	lorida. Fam i	familiar with,	and accept
SIGNATURE:	Signature, typed	or printed name of registered agent a	and title if applicable.	(NOTE: Regis	stered Agent signature require	d when reinstating)		DATE		<u> </u>
After	r May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department of	State			I	Election Campaign F Trust Fund Contributi	~ ~		May Be I to Fees
10.	1	OFFICERS AND	DIRECTORS		11.	ADDITION	IS/CHANGES TO OF	FICERS AND	DIRECTORS	3 IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Parish, 3 8510 dan Naples F	IBURY BLVD., #201	☐ Del	t S	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		201120	☐ Del	ete J	UTLE VAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Del	2	TITLE NAME STREET ADDRESS DITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS 1 CITY-ST-ZIP			□ Del	N S	TITLE NAME STREET ADDRESS CITY-ST-ZIP				`Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Del	N S	ITLE IAME STREET ADDRESS ITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Deli	, N	ITLE IAME STREET ADDRESS				☐ Change	Addition
12. I hereby of indicated of the corp changed,	certify that the on this repor poration or th or on an atta	e information supplied with t or supplemental report is the receiver or idustee empo schment with an address, w	this filing does not q true and accurate ar wered to execute this ith all other like emp	ualify for the end that my sig s report as recovered.	exemption stated in Se nature shall have the quired by Chapter 607	ection 119.07(same legal eff 7, Florida Statu	3)(i), Florida Statutes, ect as if made under ites; and that my pan	I further cert oath; that I a ne appears in	ify that the in m an officer of Block 10 or	iformation or director Block 11 if

A Hach next DIC # P01000/03275-

Please charge to

8000194B

8701 Gleneagle Way Naples, FIA. 34120

March 1, 2003

Shark ga