

**FILED**  
**Apr 15, 2002 8:00 am**  
**Secretary of State**

0004555 AT

Principal Place of Business	Mailing Address
96 WILLARD STREET. #302 COCOA FL 32922	96 WILLARD STREET. #302 COCOA FL 32922

2. Principal Place of Business 1980 N. Atlantic Avenue		3. Mailing Address	
Suite, Apt. #, etc. Suite 1024		Suite, Apt. #, etc.	
City & State Cocoa Beach, Florida		City & State	
Zip 32931	Country U.S.A.	Zip	Country

4. FEI Number	<input checked="" type="checkbox"/> Applied For
	<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent
<p>BENNETT, KOHN            96 WILLARD STREET, #302            COCOA FL 32922</p>

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	<div>FL</div> <div>Zip Code</div>

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<p><b>9.</b> This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/></p> <p>(See criteria on back)</p>	<p><b>FILE NOW!!! FEE IS \$150.00</b></p> <p><b>After May 1, 2002 Fee will be \$550.00</b></p> <p><b>Make Check Payable to Department of State</b></p>	<p><b>10.</b> Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------

[illegible]

12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	President	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	K. E. Alles		
STREET ADDRESS	1980 N. Atlantic Avenue, Suite 1024		
CITY-ST-ZIP	Cocoa Beach, Florida 32931		
TITLE	V.P./Sec./Treasurer	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	N.A. Weynert		
STREET ADDRESS	1980 N. Atlantic Avenue, Suite 1024		
CITY-ST-ZIP	Cocoa Beach, Florida 32931		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

**SIGNATURE:** J. J. Ellis  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-2-02 221-783-3060  
Date Daytime Phone #

CR2E034 (9/01)