**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  Country  S. Certificate of Status Desired   \$8.75	S S DIXIE HWY LLYWOOD FL 33020  Principal Place of Business  Suite, Apt. #, etc.  City & State  Zip Country  6. Name and Address of Curren	3. Mailing Address Suite, Apt. #, etc. City & State		4. FEI Number Applied For
Suite, Apt. #, etc.  DO NOT WRITE IN THIS SPACE  City & State  City & State  City & State  Country  S. Certificate of Status Desired   \$8.75	Suite, Apt. #, etc.  City & State  Zip Country  6. Name and Address of Curren	Suite, Apt. #, etc.  City & State  Zip	Country	DO NOT WRITE IN THIS SPACE  4. FEI Number Applied For
City & State  City & State  City & State  City & State  Country  Country  Country  5. Certificate of Status Desired  \$8.75 A Fee Requir  Fee Requir  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Co  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 tole if applicable.  P. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  After May 1, 2002 Fee will be \$550.00  Make Check Payable to Department of State  10. Election Campaign Financing Trust Fund Contribution.  Address To OFFICERS AND DIRECTORS  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  13. AND DIRECTOR  14. FEI Number  15. Certificate of Status Desired  16. Status Desired  17. Name and Address of New Registered Agent  18. Street Address (P.O. Box Number is Not Acceptable)  18. Street Address (P.O. Box Number is Not Acceptable)  19. The Address of New Registered Agent  19. The Address of New Registered Ag	City & State  Country  6. Name and Address of Curren	City & State	Country	4. FEI Number Applied For
Zip Country Zip Country 5. Certificate of Status Desired  \$8.75 A Fee Requit  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name  JESSUP, ROBERT G 826 S DIXIE HWY HOLLYWOOD FL 33020  City FL Zip Co  6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  SIGNATURE  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	Country  6. Name and Address of Currer	Zip	Country	
Signature. Speak or printed name of registered agent and titled applicable.  Signature. Speak or printed name of registered agent and titled applicable.  Signature and address of box satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  OFFICERS AND DIRECTORS  1. OFFICERS AND DIRECTORS  OR SIGNATURE  D	6. Name and Address of Currer		Country	Inot Applicable
Street Address of Name and Address of Name and Address of New Registered Agent   Name		nt Registered Agent		¢9.75
Street Address (P.O. Box Number is Not Acceptable)	FSSUP ROBERT G			
826 S DIXIE HWY HOLLYWOOD FL 33020  City  City  FL  Zip Co  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)  DATE  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  Trust Fund Contribution.  Adde Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  TITLE  JESSUP, ROBERT G 826 S DIXIE HWY  HOLLYWOOD FL 33020  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Change  CHANGE  STREET ADDRESS  CITY-ST-ZIP  CHANGE  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	ESSUP ROBERT G	·	Name	
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)   DATE	•		Street Addres	ss (P.O. Box Number is Not Acceptable)
SIGNATURE   Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  9. This corporation is elligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)  10. Election Campaign Financing Trust Fund Contribution.  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  11ILE NAME STREET ADDRESS CITY-ST-ZIP  11ILE NAME STREET ADDRESS CITY-ST-ZIP  11ILE NAME STREET ADDRESS CITY-ST-ZIP  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  15. Added Trust Fund Contribution.  16. Election Campaign Financing Trust Fund Contribution.  17. Added Trust Fund Contribution.  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  19. Change NAME STREET ADDRESS CITY-ST-ZIP  10. Election Campaign Financing Trust Fund Contribution.  11. Change STREET ADDRESS CITY-ST-ZIP  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. CITY-ST-ZIP  14. Change STREET ADDRESS CITY-ST-ZIP  15. Change STREET ADDRESS CITY-ST-ZIP  16. Change STREET ADDRESS CITY-ST-ZIP  17. Change STREET ADDRESS CITY-ST-ZIP	OLLYWOOD FL 33020		City	FL Zip Code
11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  Oblete  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	Signature, typed or printed name of registered age This corporation is eligible to satisfy its Intangib Fax filing requirement and elects to do so.	ole FILE NOW After May 1, 20	'!!! FEE IS \$150.00 002 Fee will be \$550.00	0 10. Election Campaign Financing \$5.00 May Be
TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			State
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NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	JESSUP, ROBERT G 826 S DIXIE HWY	□ Delete	NAME STREET ADDRESS	☐ Change ☐ Addition
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Feb. 6/02