## 2003 FOR PROFIT CORPORATION

UN	<b>IFORM BUSIN</b>	ESS REPOR	T (UBR)	)	Apr 16, 2003 8:00 am	
DOCU 1. Entity Nam	MENT # P020	00020501			Secretary of State 04-16-2003 90158 030 ***150.00	
Principal Place of Business 320 SE 18TH ST FT LAUDERDALE FL 33316		Mailing Address 320 SE 18TH ST FT LAUDERDALE FL 3331			6001827 <u>:</u>	
420 1	Place of Business  VE 3RD STREET	3. Mailing Address 420 NE 31	RD STREET		)	
Suite, Apt.	re	Suite, Apt. #, etc.		4	CHECK HERE IF MAKING CHANGES  FEI Number Applied For	
Zio L	Country  BROWARD	- FT. LAUDERDA Zip 33301	Country BROWAR	D 5	37 − 143 912 Not Applicable  Not Applicable  \$8.75 Additional Fee Required	
	6. Name and Address of Curre	nt Registered Agent	Name		Name and Address of New Registered Agent	
MURDOCH, ROBERT E 790 E BROWARD BLVD STE 400				Street Address (P.O. Box Number is Not Acceptable)		
ft laudi	ERDALE FL 33301		City		FL Zip Code	
Afte	Signature, typed or printed name of registered age ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 c Payable to Florida Department	0	f: Registered Agent signatu	re required whe	9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.  Added to Fees	
10.	OFFICERS AN	ID DIRECTORS	11,		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GALLUZZO, GEORGE R JR 320 SE 18TH ST FT LAUDERDALE FL 33316	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4201	Vallenge Addition IZZO, GEORGE R. JR NE 3RP STREET AUDERDALE, FL 33301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		· Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	420	Change Addition  S. WILLIAM F. JR  NE 3ED STEET  AUDERDALE, FL 33301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	يوسد مشهم و تاكنا الله الله الله الله الله الله الله ال	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	THIES 420 I FT. (	Change DAddition  S, JAMES H  NE BED STREET  AUDEEDALE, FL 33301	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition	
indicated of the cor	on this report or supplemental report	t is true and accurate and that mapowered to execute this report a	ry signature shall ha	ve the same	in 119.07(3)(i), Florida Statutes. I further certify that the information le legal effect as if made under oath; that I am an officer or director brida Statutes; and that my name appears in Block 10 or Block 11 if	

SIGNATURE:

GEORGE