## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91456 008 \*\*\*150.00

| <ol> <li>Entity Nam</li> </ol>  |  | 22248<br>***** = 37.45%                      |   |   |                                    | 04-28-2003                          | 91456 0    | 008 ***150.00                  |
|---|--|--|---|---|------------------------------------|-------------------------------------|------------|--------------------------------|
| . 1   | DO NOT WRIT  | E IN TH                                      | IS SPAC   | CE  |                                    | 9011                                | 3543       |                                |
| 2. Principal Place of Business 7701 SW 53 Court Suite, Apt. #, etc.   |  | 7701 SW                                      | 3. Mailing Address 7701 SW 53 Court Suite, Apt. #, etc.   |   |                                    | DO NOT WRITE IF                     | N THIS SPA | ACF                            |
| City & State Miami  |  |  | City & State  |   | 4. FEI Number 41-2020556 Applied F |                                     |            | Applied For                    |
| Zip<br>33143  | Zip Country Zip  |  | Cour  |   | 5. Certificate of Sta              |                                     | └ Fe       | 8.75 Additional<br>e Required  |
|   | *  |  | •   | Name Loos   | 7. Name and Addres                 | ss of Current Re                    | gistered A | gent                           |
| -   | BO-NOT-  | MDITT -                                      |   | Lead  | ler, Paul, CPA                     |                                     |            |                                |
|   | DO NOT WRITE   |  |   |   | s (P.O. Box Number is N            | lot Acceptable)                     |            |                                |
| •   | IN THIS SPACE  |  |   |   | 151st Street                       |                                     |            |                                |
|   |  |  |   | City Miami  | Lakes                              |                                     | FL         | Zip Code<br>33014              |
| the obligat   | named entity submits this statemetions of registered agent.  Shapture based or proted name of recistered a   |  |   |   |                                    |                                     | DATE       | <u></u>                        |
| signature.  | Signature: typed or printed name of registered a<br>May 1 Fee is \$150,00<br>After May 1, Fee is \$550,00<br>Amended UBR is \$61.25<br>k Payable to Florida Departmen  | igent and title if applicable_               |   | red Office of regis   | red when reinstating)  9. Election | Campaign Financ<br>nd Contribution. | DATE sing  | \$5.00 May Be<br>Added to Fees |
| SIGNATURE Jan Make Check  | Signature: typed or printed name of registered a<br>May 1 Fee is \$150,00<br>After May 1, Fee is \$550,00<br>Amended UBR is \$61.25<br>k Payable to Florida Departmen  | gent and title if applicable_<br>it of State | , ' (NÖTE: Register<br>ITITL<br>NAh<br>STR  | red Agent signature requ  | red when reinstating)  9. Election |                                     | ing _      |                                |
| SIGNATURE Jai Make Check 10. IIILE NAME STREET ADDRESS  | Signature typed or printed name of registered a nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Departmen OFFICERS A PD Keyes, P. Andrew                        | gent and title if applicable_<br>it of State | IITL NAM STR  | LE  REET ADDRESS Y-ST-ZIP   | red when reinstating)  9. Election |                                     | ing _      |                                |
| SIGNATURE  SIGNATURE  Jac  Make Check  10.  TITLE  NAME  STREET ADDRESS  CITY ST-ZIP  TITLE  NAME  STREET ADDRESS   | Signature: typed or printed name of registered a nursy 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Departmen OFFICERS A PD Keyes, P. Andrew 7701 SW 53rd Court, M | gent and title if applicable_<br>it of State | ITITE NAMES STREET THE | LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE  | 9. Election Trust Fur              |                                     | ing 🔲      | Added to Fees                  |
| Make Check  10.  TITLE  NAME  STREET ADDRESS  CITY ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  | Signature: typed or printed name of registered a nursy 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Departmen OFFICERS A PD Keyes, P. Andrew 7701 SW 53rd Court, M | gent and title if applicable_<br>it of State | ITTL NAM STR CITY TITL NAM STR  | LE ME REET ADDRESS Y-ST-ZIP LE ME                             | 9. Election<br>Trust Fur           | nd Contribution.                    | VRIT       | Added to Fees                  |
| SIGNATURE  SIGNATURE  Jai  Make Check  10.  TITLE  NAME  STREET ADDRESS  CITY ST - ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST - ZIP  TITLE  NAME  STREET ADDRESS | Signature: typed or printed name of registered a nursy 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 k Payable to Florida Departmen OFFICERS A PD Keyes, P. Andrew 7701 SW 53rd Court, M | gent and title if applicable_<br>it of State | TITL NAM STR CITY TITL NAM STR  | LE ME REET ADDRESS Y-ST-ZIP LE ME | 9. Election<br>Trust Fur           | NOT W                               | VRIT       | Added to Fees                  |

| Q1 | GN    | ı۸ | ** | 10  | ᇀ.         |
|----|-------|----|----|-----|------------|
| ~: | 1 - D |    |    | 114 | <b>—</b> . |
|    |       |    |    |     |            |

P Andrew Keyes

April 23, 2003

Daytime Phone #