2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P02000044504 **DOCUMENT #**

1. Entity Name

SIGNATURE:



5/23

Jun 20, 2003 8:00 am Secretary of State 05-23-2003 90145 011 ***150.00

| Principal Place of Business Substitute | AVALON | OF SOUTH BEACH,INC. | | 9) | | | |
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| ## CHARLES OF STATE O | 880 NORTH VENETIAN DR | | 880 NORTH VENETIAN DR | | WW 2 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | | |
| Suite, Apt. 4. etc. City & State Country City & State Country Cou | 2. Principal P | lace of Business | 3. Mailing Address | | | | |
| City & State City & State City & State Country Country Sand Country Sand Country Sand Address of Now Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Signature Signature Signature File NOW!II FEE IS \$150.00' After May 1, 2003 Fee will be \$550.00' Make Check Papable to Prindic Department of State 10 | | | 800 ports benefited 2K | | | | |
| Country S3 De Country S4 De Co | Suite, Apt. | #, etc. | Suite, Apt. #, etč. | | CHECK HERE IF MAKING CHANGES | | |
| S. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Num | City & State | | | | 4. El Number 41 2282 | | |
| Street Address (P.O. Box Number is Not Acceptable) | 3899 | <u>usa</u> | 33139 | Country | S. Certificate of Status Desired | Fee Required | |
| Street Address (P.O. Box Number is Not Acceptable) | | 6. Name and Address of Current I | Registered Agent | Name | 7. Name and Address of Nevr Registered Agent | | |
| SIGNATURE Street Address F.O. Sch Number is Not Address F.O. Sch Number is Numbe | ESTRELLA | S NOUFI | | | | | |
| E. The above named entity, sub-risk, this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of "Fluing Light John". SIGNATURE FILE NOW!!! FEE IS \$150.00' After May 1, 2003 Fee will be \$550.00 Make Check Propable to Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE STREET ADDRESS OFFIS STREET ADDRESS OFFI S S S STREET ADDRESS OFFI S S S S S S S S S S S S S S S S S S | 880 NORT | H VENETIAN DR | | Street Address | P.O. Box Number is Not Acceptable) | | |
| 8. The above named entity submits this statement for the purpose of changing its registered algorit, or both, in the State of Florida. I am familiar with, and accept the obligations or Plank of Jordan. Signature Price Price | MIAMI BEACH FL 33139 | | | City | | Zip Code | |
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| After May 1, 2003 Fee will be \$550.00 May Be Make Check Payable to Florida Department of State Common | SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating) DATE | | | | | | |
| Make Check Payable to Florida Department of State 10 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE P | 9. Election Campaign Financing \$5.00 May 86 | | | | | | |
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| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or sustain empowered to execute this report as required by Chanter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if | | • | | | | , | |
| | 12. I hereby of indicated of the cor | certify that the information supplied with on this report or supplemental report is poration or the receiver or sustain empre | this filing does not qualify for the and accurate and that mered to execute this reports | the exemption stated in Si y signature shall have the is required by Chanter 60 | ection 119.07(3)(i), Florida Statutes. I further cert same legal effect as if made under oath; that I a 7. Florida Statutes: and that my name appears in | lly that the information in an officer or director Block 10 or Block 11 if | |