2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Feb 25, 2003 8:00 am Secretary of State

1. Entity N	UMENT # ame AL BODY OSC		0067014				01-27-2003 903	309 040 * °	**150.00
2125 NW 77	lace of Business 7 WAY #104 PINES FL 33024		Mailing Address 2125 NW 77 WAY #104 PEMBROKE PINES FL 3			i Providel III e		ir a nia laan e a x	ri sinir Arni rani
2. Principa 2125 Suite, Ap		WAY	3. Mailing Address 2125 N い 子:	TWAY					
City & St	104		Suite, Apt. #, etc.		<u>.</u>		HECK HERE IF MAKIN	NG CHANGE	s
Pe	em brook	le Pines	Pembroke	Pilles -	F1.	4. FEI Number A PPI4 Fox O	20 2003		Applied For Not Applicable
330)	6. Name and A	Stress of Current R	-33024	-BROU	JARD-	5. Certificate of Sta		\$8.75 A	
	÷	ALL CONTROL OF CONTROL	egistereti Aganii	Na Na	me	7. Name and Addre	ess of New Registered	d Agent	
	e, normand 177 way #104					O. Box Number is No	ot Acceptable)		
	KE PINES FL 3302	4		}		 -			
•				City	•		F	Zip Co	
	re named entity submi	is this statement for t	the purpose of changing it.	s registered offi	ce or registered	d agent, or both, in th	e State of Florida. I an	n familiar with	and accept
8. The above the obligation of the obligation of the state of the stat							ot (0 2 a	<u>ን</u> ጂ_
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raisety certify that the information supplied with this filling 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 trustee appowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STATURE REQUIRED OL LO 2003

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