2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Feb 27, 2003 8:00 am Secretary of State 02-17-2003 90208 024 ***150.00

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SIGNATURE 24

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### Common Street Address of New Registered Agent	
WILLIAMSON, ALAN 4210 W ROLAND ST. TAMPA FL 33609 City FL Zip Code 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. I am familiar with, and the obligations of registered agent. SigNature SigNature Signature, liped or privated name of impatered agent and title of applicable. (INDIE: Registered Agent agreeture agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SigNature SigNature Signature, liped or privated name of impatered agent and title of applicable. (INDIE: Registered Agent agreeture required when retrieting) After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO DIFFICERS AND DIRECTORS IN MAKE SIREET ADDRESS CITY-S1-2P UNIT FL WALLIAMSON, ALAN 4210 W ROLAND 3T. SIREET ADDRESS CITY-S1-2P UNIT FL SIREET ADDRESS	
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TAMPA FL 33609 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and the obligations of registered agent. SIGNATURE Signalure, hybrid or printed name of registered agent and title if applicable. [NOTE: Registered Agent argument required when remaining) After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ITILE MAME STREET ADDRESS CITY-ST-2P THE MAME STREET ADDRESS CITY-ST-2P Change Chang	
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2. I hereby 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 on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am an officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my same appears in Block 10 or Block.	dition dition