2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



FILED Mar 03, 2003 8:00 am Secretary of State

1. Entity Na		PO2	900096735 g, INC.			02-18-200	03 90114 020 *	**150.00	
,	ace of Busines TH STREET N FL 33313	s		Mailing Address 7100 NW 17TH STREET PLANTATION FL 33313			lili Adiiy Adius ibug berg	1 888 7 11111 (B) in runs	
Principal Place of Business			3. Mailing Address	3. Mailing Address					
Suite, Apt. #. etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State			City & State			4. FEI Number 13-42/1386		Applied For Not Applicab	ole
Zip Country		Zip	Country		5. Certificate of Status Desired	□ \$8.75 Fee Red	Additional		
	b. Name	and Address of Cui	rent Registered Agent			7. Name and Address of New F	legistered Agent		ヿ
7100 NW	W, LARRY / 17TH STREI			Name Street Address (P.O. Box Number is Not Acceptable)	•	
PLANTAT	110N FL 3331	3		ı	City		FL Zip (Code	7
8. The above the obliga	e named entity ations of registe	submits this stateme ared agent.	ent for the purpose of changing	its registere	ed office or register	ed agent, or both, in the State of Flo	rida. I am familiar w	ith, and accept	
SIGNATURE		r printed name of registered	agent and little if applicable. (N	OTE: Registered	Agent signature required	when reinstating)	DATE		
Afte	er May 1, 2003	FEE IS \$150.00 Fee will be \$550 Florida Departmen	.00		**	Election Campaign Fin Trust Fund Contribution		5.00 May Be ded to Fees	
10.		OFFICERS /	AND DIRECTORS	11.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT	OBS IN 11	-{
NAME STREET ADDRESS CITY-ST-ZIP	D GRUDMAN, LARRY 5 7100 NW 17TH STREET PLANTATION FL 33313		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Chang		CR2E034 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP		N S		TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP		☐ Chang	e 🔲 Addition	CR26
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET CITY-S	ADDRESS II- ZIP		☐ Change	Addition	- - - - -
TITLE NAME STREET ADORESS CITY-ST-ZIP			□ Delete	NTLE NAME STREET CITY-S	ADDRESS T-Zip		☐ Changa	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		, hips	□ Delete	TITLE NAME STREET CITY-ST	ADDRESS 1-ZIP		☐ Change	: ☐ Addition	
ITLE IAME STREET ADDRESS SITY-ST-ZIP			☐ Delete	TITLE NAME STREET /	ADORESS - ZIP		☐ Change	☐ Addition	
2. I hereby coindicated of the corn	ertify that the in on this report or	formation supplied w	rith this filing does not qualify fo I is true and accurate and that r			on 119.07(3)(i), Florida Statules. I fu ne legal effect as if made under oat	orther certify that the	information r or director	