FILED Mar 03, 2003 8:00 am

2003 FOR PROFIT CORPORA	FION
UNIFORM BUSINESS REPORT	(UBR
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	HOP	JIM DUSINE	<u> </u>	KEPUH	<u> </u>	(ARK)		Secre Secre	tary	/ OI	Star	æ
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		ENVIOLO, ATO,					9					
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	Place of Busin	hess	3. Ma	ailing Address			7	(1887) DOS TAN BEDIED ANBELL ODELL BEFF	1 02101 14 00 147	A))	A Diam too teer	I
Suite, Apt.			١.	Suite, Apt. #, etc.				CHECK HERE I	F MAKING	CHANGE	S	,
City & Stat	le		City	City & State			4.	4. FEI Number 22 - 3878 769 / Applied For Not Applicable				
Zip		Country	Zip	,	Соип	ntry	1	Certificate of Status Desired	® \$	8.75 Ad	dditional	$^{\circ}$
	5. Name	e and Address of Current F	Register	ed Agent	<u></u>		7. /	Name and Address of New Re		ee Require gent	<u>ad</u>	\dashv
·		<u></u>	<i>-</i>		-	Name				F		7
DAHSHEH	·	· Principal			,	Street Address	s (P.O. F	Box Number is Not Acceptable)				\dashv
	JNIVERSITY	DRIVE			,							4
SUITE 202	12 10n fl 3332				,							1
PLANTAD	ON FL 3334	24			,	City			FL	Zip Cod	de	7
8. The above the obligat	e named entity	y submits this statement for tered agent.	the purp	ose of changing its	registere	ed office or registr	ered ag	gent, or both, in the State of Flori		miliar with	, and accep	1
SIGNATURE .				_								
		or printed name of registered agent an	nd title if app	sicable. (NOTE	å: Registerer	d Agent signature require	ed when re	einstating)	DATE			1
		!! FEE IS \$150.00	1									7
Make Check	May 1, 200 C Payable to	03 Fee will be \$550.00 Florida Department of \$	ı		·			Election Campaign Finar Trust Fund Contribution.	ت ت	Added	00 May Be d to Fees	
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ITY-ST-ZIP				,	CITY-ST						J	i
 of the corpo 	oration or the	information supplied with thi or supplemental report is true e receiver or trustee empowe chment with an address, with	ored to av	wood at this top and an	the exemp	ption stated in Sec	ction 11! same leg	19.07(3)(i), Florida Statutes, I fur gal effect as if made under gath a Statutes; and that my name ap	ther certify to that I am a spears in Bit	hat the infi in officer o ock 10 or E	ormation ir director Block 11 if	
SIGNATL	JRE: _	SIGNATURE AND TYPED OR PRINT	TED NAME	OF SIGNING OFFICER OF	A DIRECTO	Line	<u>:cfc</u>	N 2/14	03	<u> </u>		
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