## 2003 FOR PROFIT CORPORATION

## FILED May 05, 2003 8:00 am

Foo	
2578 ENTERPRISE ROAD #302 ORANGE CITY, FL 32763  2. Principal Place of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Country  Country  Country  2578 ENTERPRISE ROAD #302 ORANGE CITY, FL 32763  3. Mailing Address  Suite, Apt. #, etc.  City & State  City & State  City & State  Country  5. Certificate of Status Desired  \$8.	
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  4. FEI Number 54-2083703  Zip  Country  Zip  Country  Country  5. Certificate of Status Desired  Fee	
City & State  City & State  City & State  City & State  4. FEI Number 54 - 2083703  Zip Country  Zip Country  5. Certificate of Status Desired  Fee	DII INSSI MIIII INSI 1881
Zip Country Zip Country 5. Certificate of Status Desired \$8. Fee	INGES
5. Certificate of Status Desired L. Fee	Applied For Not Applicable
	75 Additional Required
5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agen	t
RATHEL, LOLA R	
700 GAINSBORO STREET DELTONA, FL 32725 Street Address (P.O. Box Number is Not Acceptable)	
City FL 2	Zip Code
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 familiathe obligations of registered agent.	ar with, and accept
SIGNATURE*	
*FILE NOW!IF FEE IS \$150:00  After May 1, 2003 Fee will be \$550:00  Make Check Payable to Florida Department of State	\$5.00 May Be Added to Fees
10 OFFICERS AND DIRECTORS	ECTORS IN 11
1 1/2 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change Addition Change
- 17 7 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change <b>MAddition</b> B
TITLE Delete Delete TITLE CORPORATE SURFETAM AND DELETED OF THE STREET ADDRESS CITY-ST-ZIP DELETED DELETED DELETED DELETED DELETED AT THE STREET ADDRESS CITY-ST-ZIP DELETED A, FL 32-72-5	Change XAddition
1/1LE         Delete         1/1LE         0           NAME         NAME         NAME           STREET ADDRESS         STREET ADDRESS         C/1Y-S1-2/P	Change Addition
TITLE Delete TITLE ON THE ON T	Change
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  1.2 Liberarby certify that the information symplied with this filing close not qualify for the exemption states in Section 119 07/3V(). Florida Statutes, I further certify the	Change Addition

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Fiorida 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 empowered to execute this report as required by Chapter 60), 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.

396-804-498b