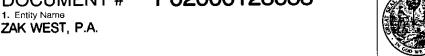
2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

P02000123638 DOCUMENT





FILED Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90077 040 ***150.00



| 10. | OFFICERS AND DIRECTORS | | 11. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TI | |
|----------------|-------------------------|----------|----------------|---|------------|
| TITLE | P | ☐ Delete | TITLE | Change | Addition |
| NAME | WEST, ZAK | | NAME | | |
| STREET ADDRESS | 19633 STAR ISLAND DRIVE | | STREET ADDRESS | | |
| CITY-ST-ZIP | BOCA RATON FL 33498 | | CITY-ST-ZIP | | |
| TITLE | | ☐ Delete | TITLE | ☐ Change | Addition |
| NAME | | | NAME | | |
| STREET ADDRESS | | | STREET ADDRESS | | 1 |
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| TITLE | | - Delete | TITLE | ☐ Change | Addition |
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| NAME | | | NAME | | l |
| STREET ADDRESS | | | STREET ADDRESS | |] |
| CITY-ST-ZIP | | | CITY-ST-ZIP | | ŀ |

12. 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 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 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 empower

SIGNATURE:

CR2E034 (10/02)