

FILED
Mar 24, 2008 08:00 A
Secretary of State

Figure 1

4. FEI Number 20-0581878	Applied For
	Not Applicable

6. Name and Address of Current Registered Agent

**DO NOT WRITE
IN THIS SPACE**

SIGNATURE.

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

~~U000000067184~~

04/08/08-80059-020 150.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3 | 10 | 08
Date

305 944 1025