2	2006 FOR PROF	T CORI	PORAT RT	ON	-	I	FILEI Feb 06, 2006
. Entity Nam	MENT # P0400013	8806					Secretary (
incipal Piaci 007 COAST COEE, FL 3	e at Business AL CIR 34761	Mailing Add 1007 COA OCOEE, FL	STAL CUP				
D	O NOT WRITE			ACE	01302006 4. FEI Number 20-19035 5. Certificate of	No Chg-P 945	CR2E034 (11/05) CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
S UNIVE TE 265	6. Name and Address of Curren LD, BRUCE J RSITY DR ION, FL 33324	<u>t Registerød Age</u>	<u> </u>		-	NOT WI HIS SP/	
The above the obligati	named entity submits this statement tions of registered agent.	for the purpose of	changing its reg	stered office or registe	ared agent, or both,	in the State of Flori	da. I am familiar with, and accept
FiL	Signature. lyped or printed neme of registered agen E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550	g. Ele	INOTE Real clion Campaign I st Fund Contribu	istered Agent signature require	id when reinstaling)	· · · · · · · · · · · · · · · · · · ·	
E HE IST ADDRESS IST - ZIP E KL IST ADDRESS I- ST - ZIP	OFFICERS AND D BEEPAT, RAMPATTI 1007 COASTAL CIR OCOEE, FL 34781 D BEEPAT, MADHO 1007 COASTAL CIR OCOEE, FL 34781	DDIRECTORS				U08004 82/18/06	0423657 -80017-012 158.75
E E E ADORESS - ST- ZIP E E E E E E E ADORESS E I ADDRESS	D BEEPAT, BRIAN K 1007 COASTAL CIRCLE OCOEE, FL 34761					NOT WI HIS SP/	
- ST- 21P E IE ECT ADORESS - S7- 21P							
	ertify that the information supplied with on this report or supplemental report poration or the receiver or trustee emp or on an attachment with an address. URE:	hat - 1	`	Ti BEEPI		lorida Statutes. I fu s if made under ca and that my name i B 1,2006	ther certily that the information h, that i am an officer or director ippears in Block 10 or Block 11 M 352-950-2575 Degime Phone 6