2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91471 049 ***150.00

1. Entity Nam	MEN (# P17193 ELWARE / TAMPA, INC.					01202005	J1 1/1 0 1J	13	0.00	
			<u>V</u>							
Principal Plac	e of Business H ST., SUITE 120	Mailing Address 3535 F 96TH ST SUITE	Mailing Address 3535 E. 96TH ST., SUITE 120							
INDIANAPOLIS		INDIANAPOLIS, IN 46240								
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2. Principal P	face of Business	3. Mailing Address								
Suite, Apt.	# etc	Suite, Apt. #, etc.			_					
Suite, Apr.		odito, , pr. p., did.			☐ CHECK HERE IF MAKING CHANGES					_
City & Stat	e	City & State			4. F	FEI Number 35-1612125		Applie Not Ar	od For]
Zip	Country	Zip	Coun	try	5.0	· · · · · · · · · · · · · · · · · · ·		5 Addition	<u> </u>	
	Name and Address of Current	Pagistand Agent				Name and Address of New Regi	Fee Re	quired		-
		Hedistelen vågur	_ <u>-</u>	- Name		Same and Modress or Hear Ledi				1
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD				Street Address (P.O. Box Number Is Not Acceptable)						
PLANTATIC	N, FL 33324									-
				City			FL Zip	Code _		
	named entity submits this statement for ions of registered agent.	or the purpose of changing its r	egister	ed office or register	red ag	ent, or both, in the State of Florid:	a. I am familiar	with, and	accept	
SIGNATURE.	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registere	d Agentsignature required	iwhen me	instating)	DATE		_	
After	FLE NOWILL FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department	of State			-	9. Election Campaign Financ Trust Fund Contribution.		\$5.00 M Added to f	lay Be Fees	
10.	OFFICERS AND	DIRECTORS	11.		AD	I DITIONS/CHANGES TO OFFICE	RS AND DIREC	TORS IN	11	
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12. I hereby of indicated of the cor.	pertify that the information supplied with on this report or suppliemental report it poration or the receiver or trustee ento or on an attachment with an address.	this filing does not qualify for to strue and accurate and that my owered to execute this report a	the exe y signat s requi	mption stated in Se ture shall have the s red by Chapter 607	ection 1 same k 7, Florid	119.07(3)(i), Florida Statutes. I fur egal effect as if made under oath da Statutes; and that my name ap	ther certify that i; that I am an o opears in Block	the inforr fficer or d 10 or Blo	mation firector ick 11 if	
cnanged,	or on an attachment with aniaddress	with all differ the empowered.				. 11 1	- اسام			
SIGNAT	URE:SIGNATURE AND THEREOF	PRINTED NAME OF SIGNING OFFICER O	R DIRECT	Presid	ien	1 4 23 03	(3/7) 8 Daytima Ph	16-2	<u> </u>	
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