	P33117 PORATION				Jul 31, 20 Secretar 07-31-2001 900	y of S	Stat	e
Principal Place of Business 1755 N. BUSINESS CENTER DRIVE TUCSON AZ 85705 JS		Mailing Address 3755 N. BUSINESS CEN TUCSON AZ 85705 US	ter dr.		1 INFILMAN IAA ININA ININA INAK INAK INAK	1861 61811 61914 I	11011 <b>0</b> 505 011	NI GINIS I <b>si</b>
2. Principal Place of Business	-	3. Mailing Address		_				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		DO NOT WRITE	IN THIS SP/	ACE	
City & State		City & State		4. FEI Number 86-0476830			plied For t Applicable	
Zip Country		Zip	Country	<b>5.</b> Ce	ertificate of Status Desired		<b>3.75</b> Add e Required	litional
6. Name and Addre	ss of Current Re	gistered Agent	<u>-  </u>	7. Na	ame and Address of New Re		<u> </u>	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD		Name Street Addre		ss (P.O. Bo	x Number is Not Acceptable)			
						<del>.</del>		
DI ANTATIONI EL 22204								
. The above named entity submits th IGNATURE	of registered agent and	title if applicable. (NC	City ts registered office or regionature		nstating)	DATE	Zip Code	
<ol> <li>This corporation is eligible to satis Tax filing requirement and elects t (See criteria on back)</li> </ol>	of registered agent and fy its Intangible o do so.	title if applicable. (NO FILE NOV After September Make Check Pay	ts registered office or regionature registered Agent signature registered A	uired when rein 750.00 State	istating) <b>10.</b> Election Campaign Fina Trust Fund Contribution	DATE	\$5.0 Addec	<b>0</b> May Be I to Fees
3. The above named entity submits the SIGNATURE	of registered agent and fy its Intangible o do so.	title if applicable. (NO FILE NOV After September Make Check Pay	ts registered office or region DTE: Registered Agent signature reconstruction VIII FEE IS \$550.00 12, 2001 Fee will be \$7	uired when rein 750.00 State	nstating) <b>10.</b> Election Campaign Fina	DATE	\$5.0 Addec	0 May Be I to Fees
B. The above named entity submits the signature. typed or printed name     Signa	of registered agent and fy its Intangible o do so.	tile if applicable. (NO FILE NOV After September Make Check Pay RECTORS	ts registered office or region DTE: Registered Agent signature reconstruction VIII FEE IS \$550.00 12, 2001 Fee will be \$7 able to Department of 12. TiTLE NAME STREET ADDRESS	uired when rein 750.00 State	istating) <b>10.</b> Election Campaign Fina Trust Fund Contribution	DATE	\$5.0 Addec IRECTOR Change	0 May Be I to Fees S IN 11 Addition
B. The above named entity submits the signature, typed or printed name     Signature, typed or preduced name     Signature, typed or printed name     Sign	of registered agent and fy its Intangible o do so. FFICERS AND DIF FFICERS AND DIF CENTER	title if applicable. (NO FILE NOV After September Make Check Pay RECTORS	ts registered office or regionatore registered Agent signature reconstruction of the state of th	uired when rein 750.00 State	istating) <b>10.</b> Election Campaign Fina Trust Fund Contribution	DATE	\$5.0 Addec IRECTOR Change	0 May Be to Fees
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