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2. I hereby certify that the information supplied with this filing 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attemption with an address, with all other time empowered.	 I hereby c indicated of the con changed, 	sertify that the information supplied with t on this report or supplemental report is t poration or the receiver or trustee empoy or on an attachment with an address, wi	his filing does not qualify for true and accurate and that m wered to execute this report a ith all other the empowered.	the exemption stated in ly signature shall have th as required by Chapter 6	ie same legal effect as 17, Florida Statules; a	if made under oath; that nd that my name appear	l ann an officer ('s in Block 10 or	or director Block 11 if	
SIGNATURE: 4/22/03 (914) 949-5213	IGNAT	URE:	ANTED NAME OF SIGNING OFFICER	RURECTOR	4/22/03			13	