2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **P93000005156**

1. Entity Name

FILED Jan 18, 2000 8:00 am Secretary of State

STEPHE	N RAKUSIN, P.A.			,	01-18-2000 9	90108 011 ***15	50.00
Principal Plac	e of Business	· Mailing Address					
ONE EAST BROWARD BLVD		ONE EAST BROWARD BLVD SUITE 1503		7			_
SUITE 1503 FT LAUDERDALE FL 33301		FT LAUDERDALE FL 33301-1804		_	- we	s te	Tr.
us 		US			" rest	4 Sv, 11	
2. Principal Place of Business One East Broward Blyd.		3. Mailing Address One East Brow	ward Bly	j Zi	request va	rect suffer	
Suite, Apt. #, etc. Suite, 1111		Suite, Apt. #, etc. Suite 1111 City & State		∤ ! ;	Co co	40	ied For
Ft. Lauderdale, FL. 3310		Ft Lauderd:	ale II.		150	·	Applicable
33301	Country USA	33301	Country USA		1500		\ litional d
	6. Name and Address of Current			addros	lame and Address of New F	legistered Agent	
					s correction Kusin, Esq.	only)	
rakusin, stephen esq			Street A	Address (P.O. B	ox Number is Not Acceptable	9)	
	EAST BROWARD BLVD E 1503			<u>East Bi</u> e 1111	roward Blvd.		
	LAUDERDALE FL 33301		<u> </u>			7:0/	`ada
			Ft.	Laudero	lale, FL	FL Zip (301
8. The above	named entity submits this statement to	r the purpose of changing its re	egistered office o	or registered ag	ent, or both, in the State of Flo	orida.	\
0.04.47.105					,		(
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: F	Registered Agent signa	ture required when re	instating)	DATE	
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! F				00	10. Election Campaign Fir	nancing C	. 00 u - n-
•	equirement and elects to do so.	After MAY 1, 2000 Make Check Payable			Trust Fund Contributio	·	5.00 May Be ded to Fees
11.	OFFICERS AND	_ <u></u>	12.		DITIONS/CHANGES TO OFF	ICERS AND DIRECT	OBS IN 11
TITLE	P	Delete	TITLE		dress Correc		
NAME	RAKUSIN, STEPHEN		NAME	Rakusin, Stephen			
STREET ADDRESS CITY-ST-ZIP	ONE EAST BROWARD BLVD SUI	TE 1503	STREET ADDRESS CITY-ST-ZIP		ist Broward B		1111
TITLE	FT LAUDERDALE FL	Delete	TITLE	Ft La	uderdale, FL		ge 🔲 Addition
NAME		_ book	NAME				
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CITY-ST-ZIP			CITY-ST-ZIP	 -		☐ Chan	ge 🔲 Addition
NAME		☐ Delete) TITLE NAME			Chair	de Manuell
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CITY-ST-ZIP			CITY-ST-ZIP	<u> </u>			<u>-</u> -
TITLE		Delete	TITLE			☐ Chan	ge 🗔 Addition
NAME STREET ADDRESS			NAME STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP	-			
TITLE		☐ Delete	TITLE	 		☐ Chan	ge 🔲 Addition
NAME		,	NAME	}			1
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP	postification to be information assembled. The	the dage and musike for the	CITY-ST-ZIP	tod in Castins	110.07(2Vi) Elected Statemen	I further position that the	no information
indicated	certify that the information supplied with on this report or supplemental report of poration or the receiver or trastice exports.	true and accurate and that my	ne exemption sta / signature shall l o required by Ch	nave the same I	י וייניס אנט אונים אונים אונים אונים אונים אונים אונים וויים וויים וויים אונים אונים אונים אונים אונים אונים א אונים אונים או אונים אונים א	oath; that I am an offi	cer or director

changed, or on an attachment with an

SIGNATURE:

(954) 356-0496