FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT # \$430000 43290 Alan Frankel & Amociates, PA

May 05, 2003 8:00 am Secretary of State 05-05-2003 91150 011 ***150.00

DO	NOT WRITE	English	90127190			
12313 SW 123 Ner 12313		3. Mailing Address 12313 Sw Suite, Apt. #, etc.				3 Sw 123 Num.
City & State Name	Horida	City & State MIAME, H.	33186	4. FEI Number 65-0419	252	Applied For Not Applicable
33.1 <i>86_</i> _	Country	Zio 33186	Country	5. Certificate of Statu	is Desired	\$8.75 Additional
			* * * * * * * * * * * * * * * * * * * *	7. Name and Address	of Current Registered	
	DO NOT W IN THIS SE		Name H Street Addres	omer, beffre s (P.O. Box Number is Not 931 SW 45	y Abceptable) The Sheet	
			City 7	avie	FL	Zip Code a O
After M Amen	- May 1 Fee is \$150.00 ay 1, Fee is \$550.00 ded UBR is \$61.25 e to Florida Department of	State		l l	ampaign Financing Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS AND	DIRECTORS		Carlot Carrell Carlot		
NAME STREET ADDRESS CITY-ST-ZIP	ikel, Dian 13 SW 123 Pers www. 91071da 3	331 <i>8</i> 6	NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY ST-ZIP			
TITLE			Tirle			Ítalijka – veld i
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	DO:	NOT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	INT	HIS SPAC	CE
TITLE NAME STREET ADDRESS			TITLE NAME STREET ADDRESS			

12. I hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME