FILED Feb 22, 2000 8:00 am Secretary of State 02-22-2000 90037 040 ***150.00

2000 UNIFORM	BUSINESS	REPORT	(UBR
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DOCUMENT # P93000072958

BRIAN M. BURSA, P.A.

Suite, Apt. #, atc. City & State City & St	Principal Plac	e of Business	Mailing Address	_]					
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BURSA, BRIAN M 111-2ND AVENUE N.E. SUITE 620 S.T. PETERSBURG FL 33701 a. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Fict da. SIGNATURE Dimutal hyster or picted connect in political agent and title if appricable. City S.F. P.	Zip	Zip Country Zip Coun		Count	try	5.	Certificate of S	Status Desired		\$8.75 Add	ditional
BURSA, BRIAN M 111-2ND AVENUE N.E. SUITE 620 ST. PETERSBURG FL 33701 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its intango bid face and the file approach. (See orithin on back): 10. FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State 9. This corporation is eligible to satisfy its intango bid face and the file approach. (See orithin on back): 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE 13. OFFICERS AND DIRECTORS 14. Delicas 17. OFFICERS AND DIRECTORS 17. STAP 17. OFFICERS AND DIRECTORS IN 11 TITLE 10. Election Campaign Financing 17. Trust Fund Contribution 18. Addition 19. SYMPHONY ISLES BLVD. 11. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS IN 11 TITLE 10. Election Campaign Financing 17. Trust Fund Contribution 18. Addition 19. SYMPHONY ISLES BLVD. 11. OFFICERS AND DIRECTORS IN 11 TITLE 10. Deleces 11. OFFICERS AND DIRECTORS IN 11 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 13. Election Campaign Financing 14. Campaign Financing 15. SOO May Be Addition 16. Election Campaign Financing 17. Trust Fund Contribution 18. Election Campaign Financing 18. Election Campaign Financing 19. Campaign Financing 19. SAO DIRECTORS IN 11 10. Election Campaign Financing 10. Electi		6 Nome and Address of Current	logistared Agent			7	Name and Ad	drass of New	Registered		<u> </u>
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ST. PETERSBURG FL 33701 City St. Peters busing FL Zip Code 3370 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, bytel or printed named in positiopad agent and the in applicable. NOTE: Registered Agent signature required when reintaking) DATE 9. This corporation is eligible to assisty its intangible Tax killing requirement and elected to do so. Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. Delete TITLE MAME BURSA, BRIAN M 911 SYMPHONY ISLES BLVD. APOLLO BEACH FL 33572 OTFI-ST-JP Delete TITLE MAME BURSA, BRIAN M STRET ADDRESS OTFI-ST-JP Delete TITLE DUINNS/ STRET ADDRESS OTFI-ST-JP Delete Delete DUINNS/ STRET ADDRESS OTFI-ST-JP Delete Delete Delete DUINNS/ STRET ADDRESS OTFI-ST-JP Delete D					Street Address (P.O. Box Number is Not Acceptable)						
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13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR