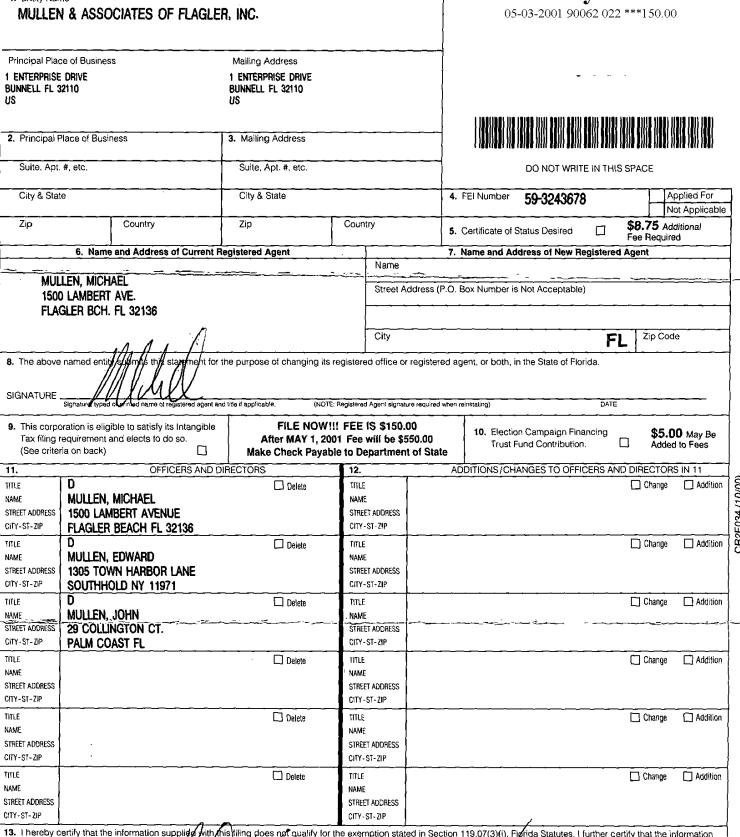
## **2001 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # P93000086219

1. Entity Name

## FILED May 03, 2001 8:00 am Secretary of State



13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fjerida Statutes. I further certify that the information indicated on this report or supplemental triport is true and accurate and that my signature shall have the same legal effect exift made under oath; that I am an officer or director of the corporation or the receiver or trusted employee and the 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 applicacy, without given the endowment of the execution of the corporation or the receiver of trusted employee and the endowment of the execution of the corporation or the receiver of the execution of the corporation of the execution of the corporation of the corporation of the corporation of the execution of the

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/0/

Daytime Phone #