

2000 UNIFORM BUSINESS REPORT (UBR)

0203437

DOCUMENT # P94000007391

1. Entity Name
C.T.T.T. OF ORLANDO, INC.

FILED
00 MAR 16 AM 11:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 3250 MARY STREET.. STE 203 MIAMI FL 33133	Mailing Address 3250 MARY STREET.. STE 203 MIAMI FL 33133-5232
----------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
------------------------------------------------------------------------------	------------------------------------------------------------------

4. FEI Number **65-0483358** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**SCHATZ, RICHARD E
 C/O STEARNS WEAVER MILLER
 150 WEST FLAGLER STREET, SUITE 2200
 MIAMI FL 33130**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2000 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PSD	<input type="checkbox"/> Delete
NAME WEISER, BRADLEY A	
STREET ADDRESS 3250 MARY STREET., STE 203	
CITY-ST-ZIP MIAMI FL 33133	
TITLE D	<input type="checkbox"/> Delete
NAME WEISER, WARREN	
STREET ADDRESS 3250 MARY STREET., STE 203	
CITY-ST-ZIP MIAMI FL 33133	
TITLE D	<input type="checkbox"/> Delete
NAME WEISER, DOUGLAS	
STREET ADDRESS 3250 MARY STREET., STE 203	
CITY-ST-ZIP MIAMI FL 33133	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**800003193238--9
 -04/03/00--01091--010
 ****150.00 ****150.00**

KE

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: *Bradley A. Weiser* DATE: 3/16/00 DAYTIME PHONE #: 305-461-2228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)