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305-461-2228

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Bradley TA AND TYPED OR PRINTER MAME OF SIGNING OFFICER OR DIRECTOR

Mar 14, 2001 8:00 am DOCUMENT # **P94000007391** Secretary of State C.T.T.T. OF ORLANDO, INC. 03-14-2001 90012 016 ***150.00 Principal Place of Business Mailing Address 3250 MARY STREET.. STE 203 3250 MARY STREET., STE 203 MIAMI FL 33133 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0483358 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name SCHATZ, RICHARD E Street Address (P.O. Box Number is Not Acceptable) C/O STEARNS WEAVER MILLER 150 WEST FLAGLER STREET, SUITE 2200 **MIAMI FL 33130** City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE ☐ Change ☐ Addition WEISER, BRADLEY A NAME NAME STREET ADDRESS STREET ADDRESS 3250 MARY STREET., STE 203 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33133 Delete TITLE ☐ Change ☐ Addition TITLE WEISER, WARREN NAME NAME STREET ADDRESS 3250 MARY STREET., STE 203 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP Delete TITLE TITLE ☐ Change ☐ Addition WEISER, DOUGLAS NAME NAME STREET ADDRESS 3250 MARY STREET., STE 203 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33133** ☐ Change Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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.