SECOND NO	DTICE: COR	PORATION	WILL BE DISSOLV	ED ON OR AFT	ER SEPT	EMBER 30	, 1998.			D	
PROFIT				OLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).				Jul 09 1998 8:00am			
	RPO <b>R</b> ATI UAL <b>R</b> EP		Sandra B. Mortham								
1998				Secretary of State DIVISION OF CORPORATIONS				Secretary of State			
DOCU 1. Corporation		# P9	4000008	964 (6)							
LEVY, H		ARIANI, C	urtin, wiener,	• • •	8						
Principal Place of Business Mailing Address						·····			VIAL VOILA VOILA VEIVA	ARTER HALLA RELIE REAR INNE	
1400 CENTREPARK BLVD. SUITE 1000				1400 CENTREPARK BLVD. SUITE 1000							
WEST PALM	BEACH FL 334	01		WEST PALM BEACH FL \$3401				DO NOT WRITE IN THIS SPACE			
								<ol> <li>Date Incorporated or Qualifier 02/03/1994</li> </ol>	3		
	Place of Busin	ness	2a. M	ailing Address	<u> </u>			4. FEI Number		Applied For	
21 Sulte Ant	1 Suite, Apt. #, etc.			26			, ·	65-0465861		Not Applicable	
22				Suite, Apt. #, etc.				5. Certificate of Status Desired		8.75 Additional Fee Regulred	
	City & State			City & State				<ol> <li>Election Campaign Financing Trust Fund Contribution</li> </ol>		\$5.00 May Be Added to Fees	
Zip		Country	Zi	р —		untry		B. This corporation owes or has		·     •	
24	9. Name	and Address	29 s of Current Register	ed Agent	30	r		Personal Property Tax due Ju 10. Name and Address of New		es No	
KNE	EEN, <b>JE</b> FFR		······································	······		81 Name	)				
	O CENTREP	ARK BLVD.				82 Street	Addres	Address (P.O. Box Number is Not Acceptable)			
	te 1000 St palm be		401			83				·	
TTEN	51 FAQMID:	SAUN FE 33	-01								
						84 City			FLI	5 Zip Code	
office or	registered ac	jent, or both, i	ns 607.0502 and 607.1 in the State of Florida. pt the obligations of, se	Such change was	authorize	d by the corr	corporat poration	tion submits this statement for the p 's board of directors. I hereby acce	urpose of chang pt the appointme	ing its registered ant as registered	
SIGNATURE	Sloosture typed	or printed name of	registered agent and tille if app	licable /b		ered égeni elensi		d when reinstating)	DATE		
12.			ICERS AND DIRECT		13.			ADDITIONS/CHANGES TO OF			
TITLE	DVT					1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		PT	Y	Change Addition	
NAME STREET ADDRESS	KNBEN, JEFFREY D 1400 Centrepark Blvd., Suit										
CITY-ST-ZIP		LM BEACH		_		ITY-ST-ZIP					
TITLE	DP			DELETE 2		2.1 TITLE				Change Addition	
NAME	WIENGR		BLVD., SUITE 1000			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	WEST PA	FL			2.3 STREET ADDRESS						
TITLE	DVS			DELETE	3.1 T		1			Change Addition	
						3.2 NAME					
STREET ADDRESS CITY-ST-ZIP		LM BEACH				IREET ADDRESS					
TITLE	DV			DELETE	4 1 TI	· · · ·	T	VS		Change Addition	
		SO, ALEXAN			4.2 N/						
STREET ADDRESS CITY-ST-ZIP				E 1000		4.3 STREET ADDRESS 4.4 CITY-ST-ZIP					
TITLE	DV		• • • • • • • • • • • • • • • • • • • •		4.4 Ci 5.1 Ti		<u> </u>			Change Addition	
NAME	MARIANI,				5.2 N/						
STREET ADDRESS		itrepark 8 Lm Beach I	LVD., SUITE 1000			REET ADDRESS					
TITLE	DV		· •	DELETE	5.4 Ci 6.1 Ti	TY-ST-ZIP TLE			. <b>-</b> ]	Change Addition	
NAME	CURTIN, J				6.2 N/	WE.			اسا		
STREET ADDRESS			LVD., SUITE 1000			REET ADDRESS					
CITY-ST-ZIP 14. I hereby co	ertify that the	M BEACH I	pplied with this filing de	pes not qualify for t	6.4 Cl he exemp	TY-ST-ZIP ption stated in	l n_sectior	n 119.07(3)(i), Florida Statutes. I fur	ther certify that t	he information	
indicated of an officer i	on this <b>an</b> nual or director of i	report or sup the corporatio	plemental annual repo	ort is true and accu istee empowered t	rate and o execute	that my signa this report a	ature sh as requi	n 119.07(3)(i), Florida Statutes. I fur all have the same legal effect as if red by Chapter 607, Florida Statute	made under oal s; and that my r	h; that I am iame appears	
IT DIOCK 12	LOI DIDCK TS			n an audress.		$\supset \iota$	/	01 21-98	561	_	