FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUME 1. Egitiy Name	ENT# p94000	D25943	. 'N	102-1358	file	ED.
Soun	CE ONE YAC	HT SERVICE	C KE	<u>ح</u>	02 MAY 22	AM 8: 32
	O NOT WRITE				SECRETARY (TALLAHASSEE	OF STATE LIFEOBINA
2. Principal Place	of Business	3. Mailing Address				0000
2900 NE 41 TH ST SAME Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE X		PACE () - U (
24.07 (4.1)						Applied For
City & State	OUSE POINT, FL	City & State			4. FEI Number 65-0480247	Not Applicable
Zip 330	ity & State IGHT HOUSE POINT, FL ip 33064 Country Zip		Country		5. Certificate of Status Desired S8.75 Additional Fee Required	
				News	7. Name and Address of Current Registere	d Agent
	DO NOT W	DITE	S-motor.	Name ALA	N-KATZ	
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable)		
	_IN THIS₌SE	ACE				÷
2.5				City LIGHT	HOUSE POINT FL	Zip Code 33064
B. The above nar	med entity submits this statement fo	r the purpose of changing its	register	red office or registe	red agent, or both, in the State of Florida.	
,	10 7	/ .				
SIGNATURE	nature, typed or printed name of registered agent	God trile if annicatria (NOTE	Register	2 ed Agent signature require	d when renshing) DATE	
<u>- </u>		W. P. weight language 1. M		and the second s		
	ion is eligible to satisfy its Intangible uirement and elects to do so.	After May	1, Fee	is \$550.00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be
(See criteria d	***	Make Check Payeb			25 St. 1885	
11. OFFICERS AND DIRECTORS						
1 1	PRESIDENT ALAN KATZ		TITI MAJ	and the second	OODOOEEG	4688=-4
STREET ADDRESS	2900 NE 47	TH ST	ST	REET ADORESS	80000569 -06/06/02	
CITY-ST-ZIP	ALAN KATZ 2900 NE 47 LIGHTHOUSE PU	INT, FC 33069	र ज	Y-S1-ZP	****150.0	01054025 90****450:00
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STREET ADDRESS	X · · · · · · · · · · · · · · · · · · ·		25,69	REET ADDRESS		
CITY-ST-ZIP			1000	TY-ST-ZIP	10.07(2)5 5-14-5-14-5-14-5-14-5-14-5-14-5-14-5-1	ortifu that the information
indicated or	tify that the information supplied wit in this report or supplemental report pration or the receiver or trustee em with an address, with all other like e	is true and accurate and that i powered to execute this repo	r the ex my sign at as re	kemption stated in S nature shall have the equired by Chapter	section 119.07(3)(i), Florida Statutes. I further of same legal effect as if made under oath; that 607, Florida Statutes; and that my name appear.	ars in Block 11 or on an
	1	1 24	-	4-3	22-02 954-	782-4107
SIGNATU	JRE:SIGNATURE AND TYPETION	PRINTELL RANGE OF SIGNING OFFICES	OR DIRE		Date	Daytime Phone #
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