2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P94000028190 1. Entity Name RYAN REPORTING INC.

FILED May 30, 2002 8:00 am Secretary of State 05-30-2002 91605 007 ***150.00

So Name and Address of Current Registered Agent So Name and Address of Current Registered Agent FRYAN, DEXTER 660 NE 165TH ST MIAMI FL 33162 City City City City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code City FL City	ς.				- 1					
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Street Address (P.O. Box Number is Not Acceptable) City FL Zip Cook	DVAN DI	EVTED		Name					*	
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, speed or private frame of registered agent and title if applicable. (NOTE Registered Agent, or both, in the State of Florida. 9. This corporation is elligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) Make Check Payable to Department of State				Street Addre	ess (P.O. Bo	P.O. Box Number is Not Acceptable)				
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13. Thereby 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 mode under certify that the information		- att. de -a al - t. t								

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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