FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED May 27, 2002 8:00 am Secretary of State

1. Entity Name	V & A HAR	0037249 VESTING,	7. TN) =. \		05-27-2002 90420	047 ***158.75	
D	O NOT WRITE	IN THIS	SPAC	E		U 1 V 20 U		
2. Principal Plac	e of Business Nashiwston Si.	3. Mailing Address						
Suite, Apt. #,		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE		
City & State Alon P	ark, Fl	City & State				4. FEI Number Applied For Not Applicable		
Zip 33 82 5	Country U.S.	Zip	Country		5. Certificate of Status Desired \$8.75 Additional Fee Required			
			<u> </u>	Name .		ime and Address of Current Registered	· · · · · · · · · · · · · · · · · · ·	
DO NOT WRITE IN THIS SPACE			Street		ess (P.O. Box Number is Not Acceptable)			
			e purpose of changing its registere		NP	ark FL	Zip Code	
SIGNATURE Sign 9. This corporation Tax filing requires (See criteria o	Naw dy Hanalure, typed or printed name of registered agent and on is eligible to satisfy its Intangible irement and elects to do so.	January 1 After M.	OTE: Reportered - May 1 Fee I ded UBR I	d Agent Signaturo requires la \$150.00 s \$550.00 s \$61.25	uired When re	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11.	OFFICERS AND	DIRECTORS						
NAME STREET ADDRESS CITY-ST-ZIP	landy Hawk 24 Washing Tor NON Park, Fl	√ 57. 33825				·	CR2E034B (12/01)	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TO A CONTROL OF THE CONTROL			1				CRZEO	
TITLE NAME -	·		TITLE					
STREET ADDRESS : CITY-ST-ZIP	35		STREE	T ADDRESS ST-ZIP	IN MOT MOTE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				T ADDRESS ST-ZIP		IN THIS SPAC	E	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TIFLE NAME STREE CITY-S	T ADDRESS ST-ZIP				
TITLE NAME. STREET ADDRESS CITY-ST-ZIP				ADDRESS				
	that the information supplied with t is report or supplemental report is t ion or the receiver or trustee empo	his filing does not qualify f rue and accurate and that wered to execute this rep	or the exem	1	Section 11	9.07(3)(i). Florida Statutes. I further certify to gal effect as if made under oath; that I am a	hat the information officer or director	

attachment with an address, with all other like empowered.

NG OFFICER OF DERECTOR HOUSE