2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR**

SIGNATURE:

May 05, 2003 8:00 am & Secretary of State P94000046647 DOCUMENT # 05-05-2003 91801 012 ***150.00 1. Entity Name TEMPLE & CHURCH ASSOCIATES, INC. Principal Place of Business Mailing Address **キャスチののり** 2305 N W 107TH AVE P O BOX 521872 STE 1M18. BOX 47 MIAMI FL 33152-1872 **MIAMI FL 33172** US 3. Mailing Address Principal Place of Business Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number 65-0519545 Not Applicable 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 PELLISSERY, JEROME J 1483 ESTANCIA CIR WESTON FL 33327 WESTON 8. The above named entity submits this statement of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. **trome** SIGNATURE agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ۱۵. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. CR2E034 (10/02) TITLE ☐ Addition TITLE ☐ Delete NAME NAME PELLISSERY, JEROME J STREET ADDRESS 1483 ESTANCIA CIR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33327 Change ☐ Addition TITLE ☐ Delete TITLE PD NAME NAME PELLISSERY, STALIN JOSE STREET ADDRESS STREET ADDRESS 1483 ESTANCIA CIR CITY-ST-ZIP CITY-ST-ZIP Weston FL 33327 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED