2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # P9400054135 Apr 07, 2000 8:00 am Secretary of State RHA CHARTERED 04-07-2000 90053 021 ***150.00 Mailing Address Principal Place of Business 3600 PARK CENTRAL BLVD NORTH 3600 PARK CENTRAL BLVD NORTH **SUITE 3610** POMPANO BEACH FL 33064-2245 POMPANO BEACH FL 33064 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-3282560 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired ----Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DANIELS, RICHARD Street Address (P.O. Box Number is Not Acceptable) 241 SEVILLA AVE. PENTHOUSE TWO CORAL GABLES FL 33134 Zip Code City 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State

\$5.00 May Be Added to Fees

11.	OFFICERS AND DIRECTORS		12.	, ADDITION:	S/CHANGES TO OFF	ICERS AND D	DIRECTORS	IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P HAIG, ROBERT 1500 UNIVERSITY DRIVE, #212 CORAL SPRINGS FL 33071 VS MCVAY, JOSEPH	Delete Delete	TITLE NAME STHEET ADDRESS CITY-ST-ZIP TITLE NAME	PHAIG, ROS 3600 PARA POMPANO	BERT CENTRAC	Z BLV	Change	☐ Addition #36/0
STREET ADDRESS CITY-ST-ZIP	3225 CRAYTON RD NAPLES FL 34102		STREET ADDRESS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT PETROCELLI, GEORGE 2361 NW 30TH STREET BOCA RATON FL 33431	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PETROCELLI, GEORGE 2361 NW 30TH STREET BOCA RATON FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _

REQUIRIGEORGE M. PETROCELLI SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR