## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 79400085927

Oak Island Development Inc.

**SIGNATURE:** 

## FILED May 21, 2002 8:00 am Secretary of State

05-21-2002 91164 007 \*\*\*150.00

<u> </u>	. 15/4/10 DEVELOP	Men one.			
	DO NOT WRIT	E IN THIS	SPACE		
Principal Place of Business     3. Mailing Address				-	
6601 SW 128 St		6601 50	N 198 84	_	
Suite, Apt.	#, etc. n; , fl	Suite, Apt. #, etc.	Cl	DO NOT WRITE IN THIS SP.	ACE
City & Stat		City & State	-F	4. FEI Number	Applied For
331:		33156	USA	65-0550564	Not Applicable
Zip	Country	Zip	Country		8.75 Additional se Required
				7. Name and Address of Current Registered A	gent
	DO NOT	A Fried Bright Brief	Name 64	zorge WcArdle	
१९ महाम कावा	<ul><li>DO-NOT-V</li></ul>	VKIIE		(P.O. Box Number is Not Acceptable)	
	IN THIS S	PACE	<i>f</i>	5 106 (1	MATERIAL STATE AND ADDRESS OF STATE OF
			6601		7:- 0-3
			City M	tami FL	Zip Code 33156
8. The above	named entity submits this statemen	t for the purpose of changir	g its registered office or registe	ered agent, or both, in the State of Florida.	
		. (	2-11/1/1/	// 1	
SIGNATURE .	George Mary	lle (	- MUMA	4/30/6.	2
	Signature, typed or printed name of registered as		ONOTE Registered Agent signature require	ed when reinstating) DATE:	
•	oration is eligible to satisfy its Intang		I - May 1 Fee is \$150.00 May 1, Fee is \$550.00	10. Election Campaign Financing	\$5.00 May Be
Tax hing requirement and elects to do so.  Amended			nded UBR is \$61.25	Trust Fund Contribution.	Added to Fees
<u>`</u>		Make Check F	ayable to Department of Sta	ate	
11.	President	ND DIRECTORS	TITLE	<del>,</del>	
TITLE NAME	George W. Ardle		NAME		
STREET ADDRESS	6601 SW 128 St		STREET ADDRESS		
CITY-ST-ZIP	Miami, F1 3315	ما	CITY-ST-ZIP		• •
TITLE	Vice- Dresident		TITLE	`	
NAME	Valeria McArdle		NAME		
STREET ADDRESS	6601 500 128 59		STREET ADDRESS		•
CITY-ST-ZIP	Minmi F1 33156	<u></u>	CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , ,	
TITLE	Secretary		TITLE	·	
NAME	Valerie McArdle		NAME STREET ADDRESS	رون کرمندند و رون <del>دکند</del> و برای با دراند داده داده داده داده دراند و دراند داده دراند د	<u> </u>
STREET ADDRESS CITY-ST-ZIP	6601 5W (28 5t-	, ,	CITY-ST-ZIP	DO NOT WRIT	Έ
TITLE	Miami, Fl 33156		TITLE		
NAME	Trensurer		NAME	IN THIS SPAC	
STREET ADDRESS	beorge McArdle 6001 FW 128 St		STREET ADDRESS		
CITY-ST-ZIP	Miami, 61 33156		CITY-ST-ZIP		
TITLE			TITLE	·	
NAME			NAME		
STREET ADDRESS	•		STREET ADDRESS	· •	
CITY-ST-ZIP			CITY-ST-ZIP		
TILE			TITLE		
NAME CENTER ADDRESS			NAME CYPOCHT ADDRESS	•	
STREET ADDRESS CITY-ST-ZIP		, •	STREET ADDRESS CITY-ST-ZIP	•	
13   hereby	rertify that the information supplied a	with this filing does not quali	fy for the exemption stated in S	Section 119.07(3)(i), Florida Statutes. I further certify	that the information
indicated of the co	l on this report or supplemental repo	rt is true and accurate and t empowered to execute this	hat my signature shall have the	e same legal effect as if made under oath; that I am 607, Florida Statutes; and that my name appears in	an officer or director
auacime	THE PERSON CONTROL OF THE PERSON CONTROL BEEF	omportored.	4 6 6		