FILED Feb 20, 2002 8:00 am Secretary of State 02-20-2002 90124 029 ***150.00												
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umber 59-3285367				Applied For Not Applicable								
cate of Status Desired		\$8.7 Fee F		Additional								
and Address of New Re	gistered	Agent										
umber is Not Acceptable)												
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2002 UNIFORM BUSINESS REPORT (UBR)					FILED						
DOCUMENT # P9400088358					Feb 20, 2002 8:00 am Secretary of State						
2929, IN	C.				02-20-20	002 901 24 029 *	**150.	00			
Principal Plac	ce of Business	Mailing Address			_						
2929 NORTH A1A FLAGLER BEACH FL 32136		2929 N. A1A Flagler Beach Fl 3: US	FLAGLER BEACH FL 32136								
Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE						
City & State		City & State	City & State		4. FEI Number	:007	-	plied For			
Zip Country		Zip	Zip Coun		5. Certificate of Status Desired 1 1 40.70 Aug						
<u> </u>	6. Name and Address of Curr	ent Registered Agent			7. Name and Address of Ne	Fee_	Required	<u> </u>			
	or Hamo and Addieso of Odiff	on neglaties Agent		Name	7. Name and Address of Ne	iw negistered Agen	1				
MACDOUGALL, LINDA				Street Address (P.O. Box Number is Not Acceptable)							
2929 N. FLAGLER	A 1A R BEACH FL 32136										
TENGLET BEROTTY C GETOG				City FL Zip Code							
3. The above	named entity submits this statemer	nt for the purpose of changing it	s registere	ed office or register	ed agent, or both, in the State of						
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NO	TE: Registeren	d Agent signature required	t when rejnotation)	DATE					
9. This corpo	pration is eligible to satisfy its Intang				www.romsadargy	DATE					
Tax filing requirement and elects to do so. (See criteria on back)		After May 1, 20	After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Sta		10. Election Campaigr Trust Fund Contrib			O May Be to Fees			
1.	OFFICERS A	ND DIRECTORS	12.		ADDITIONS/CHANGES TO	OFFICERS AND DIR	ECTORS	3 IN 11			
ITLE AME	PD MACDOUGALL, IRVIN	. Delete	TITLE NAME				Change	☐ Addition			
TREET ADDRESS	120 DUCKHAWK CIR DAYTONA BEACH FL 32119			ET ADDRESS ST-ZIP							
TLE '	ST	☐ Delete	TITLE	 			Change	Addition			
AME TREET ADDRESS	MACDOUGALL, LINDA 120 DUCK HAWK CIR		NAME STREE	ET ADDRESS							
ITY-ST-ZIP	DAYTONA BEACH FL 32119			ST-ZIP		=					
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AME			NAME	1		, L.J. \	Statigo				
TREET ADDRESS TY-ST-ZIP				T ADDRESS ST-ZIP							
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AME FREET ADDRESS			NAME	T ADDRESS				}			
TY-ST-ZIP				ST-ZIP							

3. 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 of trustee empowered to elecute 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 last address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE:

Daylimie Phone #