2003 FOR PROFIT CORPORATION

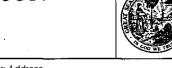
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

SIGNATURE:

P94000089657

1. Entity Name DELLPAZ, INC.



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90160 044 ***150.00

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6752 FOREST GREENACRES	FL 33413		51 SE Delr US	ng Address EABREEZE AVE AY BCH FL 33483	-						
2. Principal Place of Business				3. Mailing Address			Ì	t immitent tim idilit Aldit knitt mattt galit Al		aı 0fiit 1881 (88)	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & Stat	City & State			City & State			4.	65-0542524	 -	Applied For Not Applicable	
Zip		Country	Zip Count			try	5.	5. Certificate of Status Desired See Required			
	6. Name a	nd Address of Current R	legistere	ed Agent		Ness	7.	Name and Address of New Register	ed Agent		
PAUL, RIC	CHARD J					Name					
=	LLINGTON T	RACE	Street Address			Street Addres	ss (P.Q.	. Box Number is Not Acceptable)			
STE E-14	.curator ii	THOC				<u> </u>					
	LM BEACH FI	33414							17:-0		
						City		·	Zip Ci	oqe	
			the purp	ose of changing its	register	ed office or regis	stered a	agent, or both, in the State of Florida. 1.	am familiar wit	h, and accept	
the obligat	tions of register	ed agent.								ľ	
SIGNATURE	Simple band or		-4 t/ul - 16	Cashia (NOT)	F. Danielan	.			-		
		printed name of registered agent an	no mie ii app	I (NOTI	E: Hegislere	d Agent signature requ	lanea when	n reinstating) DA	<u></u>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								 Election Campaign Financing Trust Fund Contribution. 		.00 May Be led to Fees	
10.	7=	OFFICERS AND C	IRECTO	RS	11.		A	ADDITIONS/CHANGES TO OFFICERS /	ND DIRECTO	RS IN 11	
TITLE	DAZ NADOL	EON		☐ Delete	TITLE	- 1			☐ Change	e 🔲 Addition	
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CITY-ST-ZIP	DELRAY BC					-ST-ZIP					
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CITY-ST-ZIP	WELLINGTO	N FL 33414				-ST-ZIP					
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	L certify that the in	oformation supplied with t	his filing	does not qualify for			Section	n 119 07(3)(i). Florida Statutes, I further	certify that the	information	
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 truetee 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.											