2002 UNIFORM BUSINESS REPORT (UBR) P95000001728 **DOCUMENT #** 1. Entity Name EQUITY VENTURES, INC. Principal Place of Business Mailing Address 3696 N. FEDERAL HIGHWAY 3696 N. FEDERAL HIGHWAY

FILED Apr 18, 2002 8:00 am Secretary of State 04-18-2002 90439 039 ***150.00

SUITE 101 FT LAUDERDAL US	E FL 33308		SUITE 101 FT LAUDERDALE FL 33308 US								
2. Principal Place of Business			3. Mailing Address					 	D) BYDY IDDE	1/00/ 10// 100/	
Suite, Apt. #	, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		-	City & State			4.	4. FEI Number 65-0544674			oplied For ot Applicable	7
Zip Country			- Zip		try et et et					3.75 Additional	
	and Address of Current R	egistered Agent		1	7.	Name and Address of New Regis		•		1	
DANZANSKY, BARNEY K 3696 N. FEDERAL HWY.					Name Street Address (P.O. Box Number is Not Acceptable)						
STE 101 FT. LAUDERDALE FL 33308					City			EI	Zip Cod	e]
<u> </u>					= -9			FL		-	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00											
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			After May 1, 200 Make Check Payab	will be \$550.00		10. Election Campaign Financi Trust Fund Contribution.	ng 🗆		May Be i to Fees		
11.	OFFICERS AND DIRECTORS					AD	DITIONS/CHANGES TO OFFICER	RS AND D	IRECTOR	S IN 11	⇃,
NAME STREET ADDRESS	3696 N. FI	KY, Barney K Ederal Hwy, Ste 101 Erdale Fl 33308	☐ Delete	11					☐ Change	☐ Addition	10/0/ VC0200
NAME STREET ADDRESS	VPD LEON, SCOTT 3696 N. FEDERAL HWY, STE 101 FT. LAUDERDALE FL 33308			11	ı	· .			☐ Change	Addition	
NAME STREET ADDRESS		avid Ederal Hwy, Ste 101 Erdale Fl 33308	☐ Delete	III .			•		□ Change	☐ Addition	
TITLE NAME . STREET ADDRESS CITY-ST-ZIP			☐ Delete	17	I			[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		***************************************	☐ Delete	III .				. [☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 13. I hereby ce	rtify that the	information supplied with the	☐ Delete	CITY-	E ET ADDRESS -ST-ZIP	Section :	119.07(3)(i), Florida Statutes. I furti		Change	Addition Addition	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-568-1520