2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED Apr 03, 2003 8:00 am Secretary of State

1. Entity Nam		00005935 inc. \sim			03-17-200	03 90472 03			
Principal Place of Business 5225 NORTH WEST 33RD AVENUE FT. LAUDERDALE FL 33309-6302 US		Mailing Address PO BOX 770070 CORAL SPRINGS FL 33077 US							
2. Principal P	Place of Business	3. Mailing Address			1 (00LIFO) HID (DIBL DUR) DURIN VALI	I FOM COM VOICE		18101 BIU 1031	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 65-0553875			pplied For x Applicable	}
Zip	Country	, Zip	Coun	ntry	5. Certificate of Status Desired		75 Add Require		
	6. Name and Address of Current	Registered Agent			7. Name and Address of New Re	gistered Agent	1]-
				Name				2 - 5 - 5	
STEINMAN, HARRY 5225 NW 33RD AVE				Street Address (ress (P.O. Box Number is Not Acceptable)				
FORT LAU	JDERDALE FL 33309			City		FL Z	ip Code		-
				'			•		1
the obligat	named entity submits this statement folions of registered agent.	or the purpose of changing its	s registere	ed office or register	ed agent, or both, in the State of Flor	ida. I am familia	ar with, i	and accept	
SIGNATURE .	Signature, typad or printed name of registered agent	and little if applicable. (NOT	TE: Registere	d Agent signature required	when reinstating)	DATE			
<u> </u>					l l				
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o				Election Campaign Fina Trust Fund Contribution			O May Be to Fees	
After	r May 1, 2003 Fee will be \$550.00	of State	11.				Added	to Fees	
After Make Check 10. Title NAME	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	of State	TITLE NAMI STRE	E	Trust Fund Contribution	CERS AND DIRE	Added	to Fees	E034 (10/02)
After Make Check 10. TITLE NAME STREET ADDRESS	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND DCEO STEINMAN, ROBERT 5225 NW 33RD AVE FT LAUDERDALE FL 33309 PRES STEINMAN, HARRY 5225 NW 33RD AVE	of State DIRECTORS	TITLE NAM STRE CITY TITLE NAM	E IE LET ADDRESS '-ST-ZIP E	Trust Fund Contribution	CERS AND DIRE	Added	to Fees	CR2E034 (10/02)
After Make Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS* CITY-ST-ZIP TITLE NAME NAME	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of OFFICERS AND DCEO STEINMAN, ROBERT 5225 NW 33RD AVE FT LAUDERDALE FL 33309 PRES STEINMAN, HARRY 5225 NW 33RD AVE FORT LAUDERDALE FL 33309 VP STEELE, JOAN	of State DIRECTORS Detecte	TITLE NAMI STRE CITY TITLE NAMI	E IE EET ADDRESSST-ZIP E EET ADDRESSST-ZIP E E	Trust Fund Contribution	CERS AND DIRE	Added	to Fees S IN 11	CR2E034 (10/02)
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. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Further certify that the mitorhation 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 of the receiver or trustee empowered to prepate this report as required by Chapter 607; Florida Statutes, and that my name appears in Black-10 or Block-11-if—changed, or on an attachment with an address, with all once like empowered.

SIGNATURE

SIGNATURE ME CYPER OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-2003

754-453-5

Deytime Phone #

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