FILED 2000 UNIFORM BUSINESS REPORT (UBR) Apr 13, 2000 8:00 am Secretary of State DOCUMENT # P95000027565 JEFFREY L. GREENBERG, P.A. 04-13-2000 90059 026 ***150.00 Mailing Address Principal Place of Business 1761 W HILLSBORO BLVD 1761 W HILLSBORO BLVD SUITE 201 SUITE 201 DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442-1561 3. Mailing Address 2. Principal Place of Business Cho Law Suite, Apt. #, etc. ffice of Jetfrey L. Gree 91 DO NOT WRITE IN THIS SPACE Ste 204D 1800 N. Fee 4. FEI Number Applied For 65-0571267 Not Applicable Zip Country \$8:75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GREENBERG, JEFFREY L Street Address (P.O. Box Number is Not Acceptable) 1761 W HILLSBORO BLVD Fcderal SUITE 201 **DEERFIELD BEACH FL 33442** purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to catisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Change Delete TITLE GREENBERG, JEFFREY L NAME 1098 NW BOCA RATON BLVD SUITE #1 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33432** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE ☐ Change Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. 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 trusted 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 an other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF URECTOR

15/00 703-8220