## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P95 000087042 TO Dialize Tours Door Succ La

## **FILED** May 27, 2002 8:00 am Secretary of State 05-27-2002 90447 026 \*\*\*150.00

## Addition Name ### Addition #### Addition ####################################	90	LUCIU N /KM	SPOIL POUC	sm	<i>e</i> .				
### Principal Place of Bushness  ### Sulfa, Apt #, etc.  ### Sulfa, Apt #, etc	Principal Place of Buginess Mailing Address  3009 NW 145 AV								
Suite, Apt. 8, etc.  City 6, State  City 6, Certificate of Status Desired  Site Application  For Propinging	Fembrone Pines								
City & State  Ci	2. Principal Place of Business		3. Mailing Address		-				
Secretary   Secr	Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
279   Country   729   Country   5. Certificate of Status Desired   \$8,75 Actionion   Feb Required	City & State		City & State		4.	FEI Number 65:06	6/2/8 A		
G. Name and Address of Current Registered Agent	Zip	Country	Zip	Country	5.		□ \$8.75 Ad	ditional	
Street Address (P.O. Box Number is Not Acceptable)  Street Address is Not Accep		6. Name and Address of Current F	Registered Agent -		<u></u>	Name and Address of New		· .	
## Part	Fernando, tarez				rennango lanet				
### Park Applies   Pa	2009 NW/45 AV.				Gliebi Address (F.O. Dox Hullider Is Not Acceptable)				
B. 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  SUBMATURE  9. This corporation is eligible to eatisfy its intamplible Text filling requirement and elects to do so.  (EVITE integreend Agent signature required when reintating)  10. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Feese					2009 NW /45 AV				
SIGNATURE  Signature, hypoder pitrous design or regished agent and close it expolication. (NOTE: Registered Agent algorithm retritiating)  9. This corporation is eligible to satisfy its intangible Tax filting requirement and elects to do so.  (See criteria on back)  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. OFFICERS AND DIRECTORS  14. OFFICERS AND DIRECTORS  15. OFFICERS AND DIRECTORS  16. Election Campaign Financing	R The shows		Alexander of the section is a	teens	1014			028	
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Tax filing requirement and elects to do so.	SIGNATURE _	Signature, types or printed passe of registered agent a	nd title if applicable. (NOTE:	Registered Agent signatu	re required when	reinstating)	DATE		
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		ertify that the information supplied with	this filing does not qualify for t		ed in Section	n 119 07/3\/i\ Florida Statutor	I further cortify that the	nformation	

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 of 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 attempt like empowered.

**SIGNATURE:**