*AMENDED 2001 UNIFORM BUSINESS REPORT (UBR)						Page 1072					
DOCUMENT # P45060087705 1. Entity Name SNEIDER MANAGEMENT, INC.					FILED 01 DEC -4 PM 3-02						
Principal Place of Business 5340 N. Federal Hwy. C/O Wolfson, Fark Suite 107 104-18 Metropoli Lighthouse Point, FL 33064 Forest Hills, N					ıtan						
2. Principal Place of Business 9600 W. Sampl Suite, Apt. #, etc. Suite 300	3. Mailing Address 9600 W. Sample Road Suite Apt. #.etc. Suite 300			đ.	DO NOT WRITE IN THIS SPACE						
Coral Springs	Cly & State Coral Springs, FL Zip Country		gs Coun	, FL	4. FEI Number 637			. \$5	 	oplied For ot Applicable	-
33065 USA 33065 6. Name and Address of Current Registered Agent				JSA					e Require		
Sneider, Andrew 2335 NW 59 Street Boca Raton, FL 33496				Name Steven W. Deutsch, Esquire Street Address & Steven W. Deutsch, Esquire Street Address & Sw. Numberis Not Acceptable)							
8. The above named entity submits that statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, hoofs of physical name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								324			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Tills NOW!!! FEE IS \$150.00. After MAY 1, 2001 Fee will be \$550.00. Make Check Payable to Department of State						Trust Fund Co		° 🗆		May Be to Fees	
11.						ADDITIONS/CHANGES TO OFFICERS AND DIRECT			_		-
NAME Sneider STREET ADDRESS 2335 NW	Sneider, Andrew I. 2335 NW 59 St Boca Raton, FL 33496			ET ADDRESS ST-ZIP	9600	sident ider, ANdrew I. QChange DA 0 W. Sample Road, #300 al Springs, FL 33065					CR2E034 (11/00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete							Change	Addition Addition	CR2
TITLE NAME STREET ADDRESS CITY-S1-ZIP		☐ Delete							Change	Addition	

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 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.

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: _

TITLE

NAME

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STREET ADDRESS

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STREET ADDRESS

CITY - ST - ZTP

CITY-ST-ZIP

CTTY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

Delete

☐ Delete

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200004704442

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Addition

Page 2012

ACCOUNT NO. : 072100000032

REFERENCE : 555906 9029A

AUTHORIZATION

COST LIMIT

ORDER DATE: December 4, 2001

ORDER TIME : 10:50 AM

ORDER NO. : 555906-005

CUSTOMER NO:

9029A

CUSTOMER: Ms. Lorraine Vanella

Frank Weinberg & Black, Pl

7805 Sw 6th Court

Plantation, FL 33324

ANNUAL REPORT FILING

AMENDED

NAME:

SNEIDER MANAGEMENT, INC.

XX ___ ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder-EXT#1118

EXAMINER'S INITIALS: