DOCUMENT # P95000093759 (5) CUSTOM STUFF, INC. Image: Constraint of the constra	ANN	PROFIT RPORATION UAL REPORT 1996	Sance Sector DIVISION (PARTMENT OF STATE bra B. Mortham retary of State DF CORPORATIONS	
Automatical and a second a second and a second and a second and a second and a second a sec	Corporatio CUSTC	on Name DM STUFF, INC. De of Business	Mailing Address	• 	
Phroppil Place of Business Ize Malery Audress Ize Proppil Place of Business Ize Application Sufe, Apl. #, etc. 21 Sufe, Apl. #, etc. Ize Sufe, Apl. #, etc. Sufe, Apl. #, etc.<)ca rato	N FL 33431	BOCA RATON FL 33	131	
Suite, Apt. #, etc. 20 Suite, Apt. #, etc. 8 6 Suite, Apt. #, etc. 8 6 Suite, Apt. #, etc. 7 Suite Suite<	Principal F	Place of Business			If all I ford
27 Pre-Induction Chy & State City & State E. Election Campaign Financing \$5.00 May 5e Addet to Field Zo Country 20 30 Fine corporation has scale by the inacquege under a 190.02, Points Statutes Links to the inacquege under a 190.02, Points Statutes Links to the inacquege under a 190.02, Points Statutes Links to the inacquege under a 190.02, Points Statutes Links Link	Suite, Apt.	. #, etc.	Suite, Apt. #, etc.	· - · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired Status Desired
ZD Zong Zong <thzong< th=""> Zong Zo</thzong<>	City & Sta	te	City & State		6. Election Campaign Financing \$5.00 May Be
In the set of the set of current Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Status Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered Agent In the LAW FRM OF LAWRENCE J SPECEL CHRID Statement Address of Low Registered In the LAW FRM OF LAWRENCE J SPECEL Christian In the State of Pords. Such change was attroved by the corporation submits this statement for the purpose of changing its registered offic or registered agent, or both, in the State of Pords. Such change was attroved by the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and registered agent are the statement for the purpose of changing its registered agent Such Theorem and registered agent are theorem and and the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and registered agent are theorem and and the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and registered agent are theorem and and the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and theorem and theorem and the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and the appointment and theorem and the corporation's barrier directors. I hereby accept the appointment as registered agent Such Theorem and theorem Such Theorem and theorem and the	Zip	Country		Country	Added to Fees
THE LAW FRM OF LAWRENCE J SPIEGEL CHRID 383 AUERA AVENUE CORAL GABLES FL 33134 Image Control Accordinates (International Avenue CORAL GABLES FL 33134 Image Control Accordinates (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordination (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordination (International Control Accordinates) Image Control Accordinates (International Control Accordinates) Image Control Accordination (International Control Contro Control Control Control Control Control Control Control		11		30	
SINTURE Milling Milling <thmilling< th=""> <thmilling< th=""> <thmilling< th=""></thmilling<></thmilling<></thmilling<>				BA City	LA KATON TL.
2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 LE PD DELETE 1 TITLE Change Addition ME HENNESSY, ROSE MARIE 12 IMME 12 IMME 12 IMME 1481 NORTHWEST 1 AVENUE, #4 13 STRET ADDRESS NY-ST-ZP BOCA RATON FL 33431 14 CIY-S1-ZP Change Addition ME VO DELETE 2 TITLE Change Addition NE VO DELETE 2 TITLE Change Addition NE SCULLARI, RTTA 13 STRET ADDRESS 14 CIY-S1-ZP Addition NE SCULLARI, RTTA 23 STRET ADDRESS	Pursuant or registe	t to the provisions of Sections 607 ered agent, or both, in the State of	.0502 and 607.1508, Florida Sta f Florida. Such change was auto		mention a limit this statement for the primage of phonoise its resistanced office
ME HENNESSY, POSE MARIE 12 NAME KEET ADDRESS 4181 NORTH-WESST 1 AVENUE, #4 13 SIREL ADDRESS Y-ST-ZIP BOCA RATON FL 33431 14 CITY-ST-ZiP LE VD DELETE 2 NAME SCULLAR, RITA 22 STREET ADDRESS Addition KEET ADDRESS HENNESST 1 AVENUE, #4 23 STREET ADDRESS Y-ST-ZIP BOCA RATON FL 33431 24 CITY-ST-ZIP ME GENOVESSE, SAM 31 STREET ADDRESS Y-ST-ZIP DELETE 3 TITLE BOCA RATON FL 33431 24 CITY-ST-ZIP ME GENOVESSE, SAM 33 STREET ADDRESS Y-ST-ZIP DELETE 3 TITLE BOCA RATON FL 33431 24 CITY-ST-ZIP ME BOCA RATON FL 33431 24 CITY-ST-ZIP ME BOCA RATON FL 33431 34 CITY-ST-ZIP Y-ST-ZIP DELETE 4 TITLE WE 42 NAME 43 STREET ADDRESS Y-ST-ZIP QENOVESSE, SAM 34 CITY-ST-ZIP ME BOCA RATON FL 33431 44 CITY-ST-ZIP LE DELETE 4 TITLE ME STREET ADDRESS Y-ST-ZIP QENOVESSE Y-ST-ZIP QENOVESSE Y-ST-ZIP QENOVESSE LE <td< th=""><th>or registe familiar w</th><th>ered agent, or both, in the State of with, and accept the obligations of,</th><th>f Florida. Such change was autho , Section 607.0505, Florida Slatu</th><th>tutes, the above-named cor prized by the corporation's t tes.</th><th>rporation submits this statement for the purpose of changing its registered office board of directors. Thereby accept the appointment as registered agent, I am</th></td<>	or registe familiar w	ered agent, or both, in the State of with, and accept the obligations of,	f Florida. Such change was autho , Section 607.0505, Florida Slatu	tutes, the above-named cor prized by the corporation's t tes.	rporation submits this statement for the purpose of changing its registered office board of directors. Thereby accept the appointment as registered agent, I am
LE VD Change Addition WE SCULLARI, RITA KET ADDRESS KET ADDRESS KET ADDRESS WE GENOVESE, SAM KET ADDRESS 4181 NORTHWEST 1 AVENUE, #4 BOCA RATON FL 33431 DELETE 3 11/LE GENOVESE, SAM 4181 NORTHWEST 1 AVENUE, #4 BOCA RATON FL 33431 DELETE 31 STREET ADDRESS 4181 NORTHWEST 1 AVENUE, #4 BOCA RATON FL 33431 DELETE 4 11/LE Change Addition KET ADDRESS 43 STREET ADDRESS 43 STREET ADDRESS 43 STREET ADDRESS 43 STREET ADDRESS 44 CITY-SI-ZIP Change Addition KET ADDRESS 43 STREET ADDRESS 44 CITY-SI-ZIP Change Addition KET ADDRESS 45 STREET ADDRESS 54 CITY-SI-ZIP LE ME KET ADDRESS 54 CITY-SI-ZIP LE Change Addition 52 NAME 53 STREET ADDRESS 54 CITY-SI-ZIP Change Addition 52 NAME 53 STREET ADDRESS 54 CITY-SI-ZIP	or registe familiar w SNATURE	ered agent, or both, in the State of with and accept the obligations of, Sordiure typed or priled name of register OFFICER	f Florida, Such change was autho , Section 607.0505, Florida Satu sd agen/and Ule#arpicabe IS AND DIRECTORS	tutes, the above named con prized by the corporation's t tes. (NOTE Registered Agent signature re 13.	rporation submits this statement for the purpose of changing its registered office board of directors. I hereby accept the appointment as registered agent, I am a gured when renstating DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
4181 NORTHWEST 1 AVENUE, #4 2.3 STREET ADDRESS BOCA RATON FL 33431 24 CHY-ST-ZIP LE STD DELETE 3.1 TITLE Me GENOVESE, SAM 3.2 NAME 3.3 STREET ADDRESS 4181 NORTHWEST 1 AVENUE, #4 3.3 STREET ADDRESS 4.4 CHY-SI-ZIP V-ST-ZIP BOCA RATON FL 33431 3.4 CHY-SI-ZIP V-ST-ZIP DELETE 4.1 CHY-SI-ZIP V-ST-ZIP DELETE 4.1 CHY-SI-ZIP V-ST-ZIP DELETE 4.1 CHY-SI-ZIP VE DELETE 5.1 TITLE VE DELETE 5.1 TITLE VET-ADDRESS SINEET ADDRESS Y-ST-ZIP SINEET ADDRESS V-ST-ZIP SINEET ADDRESS VET-ADDRESS SINEET ADDRESS V-ST-ZIP SINEET ADDRESS VEET ADDRESS SINEET ADDRESS V-ST-ZIP <td>or registe familiar w SNATURE E E E E E E E E T ADDRESS</td> <td>ered agent, or both, in the State of vith and accept the obligations of, Stordure, typed or prited name of registre OFFICER PD HENNESSY, ROSE MARI 4181 NORTHWEST 1 AVE</td> <td>f Florida, Such change was autho , Section 607.0505, Florida Satu a approach user appicable IS AND DIRECTORS</td> <td>tutes, the above-named con prized by the corporation's t tes. (NOTE: Ropstered Agent signature is 13. 1 TIFLE 12 NAME 1 3 STREET ADDRESS</td> <td>rporation submits this statement for the purpose of changing its registered office board of directors. Thereby accept the appointment as registered agent, Tam </td>	or registe familiar w SNATURE E E E E E E E E T ADDRESS	ered agent, or both, in the State of vith and accept the obligations of, Stordure, typed or prited name of registre OFFICER PD HENNESSY, ROSE MARI 4181 NORTHWEST 1 AVE	f Florida, Such change was autho , Section 607.0505, Florida Satu a approach user appicable IS AND DIRECTORS	tutes, the above-named con prized by the corporation's t tes. (NOTE: Ropstered Agent signature is 13. 1 TIFLE 12 NAME 1 3 STREET ADDRESS	rporation submits this statement for the purpose of changing its registered office board of directors. Thereby accept the appointment as registered agent, Tam
E STD DELETE 3 1 TITLE Change Addition AE GENOVESE, SAM 32 NAME 32 NAME 33 STREET ADDRESS 4181 NORTHWEST 1 AVENUE, #4 33 STREET ADDRESS 34 CITY-SI-ZIP Change Addition EET ADDRESS 4181 NORTHWEST 1 AVENUE, #4 33 STREET ADDRESS 34 CITY-SI-ZIP Change Addition E DELETE DELETE 4 1 TITLE Change Addition AE DELETE 5 1 TITLE Change Addition AE DELETE 5 1 TITLE Change Addition AE STREET ADDRESS 5 3 STREET ADDRESS	or registe familiar w SNATURE E E E E E E E E E E E E E	PD HENNESSY, ROSE MARII 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho . Section 607.0505, Florida Satu Samo and Ule + arpicadio IS AND DIRECTORS	tutes, the above-named cor prized by the corporation's t tes. (NOTE: Roystered Agent signature re 13. 1 1 TIFLE 12 NAME 1 3 STREET ADDRESS 14 CITY-SI-ZIP 2 1 TIFLE	rporation submits this statement for the purpose of changing its registered offic board of directors. I hereby accept the appointment as registered agent. I am
4181 NORTHWEST 1 AVENUE, #4 33 STREE1 ADDRESS BOCA RATON FL 33431 34 CITY-S1-ZIP E DELETE 4 1 TILE Addition 42 NAME AE 43 STREET ADDRESS r-S1-ZIP 4 CITY-S1-ZIP EET ADDRESS 43 STREET ADDRESS r-S1-ZIP 44 CITY-S1-ZIP EET ADDRESS 44 CITY-S1-ZIP EET ADDRESS 51 TILE EET ADDRESS 53 STREET ADDRESS r-S1-ZIP 51 TILE EET ADDRESS 53 STREET ADDRESS r-S1-ZIP 51 TILE EET ADDRESS 53 STREET ADDRESS r-S1-ZIP 54 CITY-S1-ZIP EET ADDRESS 54 CITY-S1-ZIP EET ADDRESS 64 CITY-S1-ZIP EET ADDRESS 63 STREET ADDRESS r-S1-ZIP 64 CITY-S1-ZIP	or registe familiar w SNATURE E E E E E E E E E E E E E E E E E E	PD HENNESSY, ROSE MARIA SUMME MEDO POINTED AND FLOOD HENNESSY, ROSE MARIA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE	f Fiorida. Such change was autho Section 607.0505, Florida Satu another appicable IS AND DIRECTORS	tutes, the above-named cor prized by the corporation's t tes. (NOTE: Properties agent signature re 13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS	rporation submits this statement for the purpose of changing its registered office board of directors. I hereby accept the appointment as registered agent. I am
E DELETE 1 TILE Change Addition RE 4 2 NAME 4 2 NAME 4 3 STREET ADDRESS 6 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP F DELETE 5 1 TILE AE DELETE 5 3 STREET ADDRESS C-ST-ZIP 5 4 CITY-ST-ZIP EET ADDRESS 5 3 STREET ADDRESS C-ST-ZIP 5 4 CITY-ST-ZIP EET ADDRESS 5 4 CITY-ST-ZIP AE DELETE BE ADDRESS 5 4 CITY-ST-ZIP EET ADDRESS 5 4 CITY-ST-ZIP EET ADDRESS 6 3 STREET ADDRESS /-ST-ZIP 6 4 CITY-ST-ZIP	or registe familiar w SNATURE * E E E E E ADDRESS (-ST-ZIP E E E E E E ADDRESS (-ST-ZIP	PD HENNESSY, ROSE MARIA Structure, tweetor protect name of reginger OFFICER PD HENNESSY, ROSE MARIA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Sand Directors SAND DIRECTORS DELETE ENUE, #4	tutes, the above-named cor prized by the corporation's t tes. (NOTE: Repetered Agent signature ra- 13. 1 1 TIFLE 1 2 NAME 1 3 STREE! ADDRESS 1 4 CITY-SI-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP	rporation submits this statement for the purpose of changing its registered offic board of directors. I hereby accept the appointment as registered agent. I am
EET ADDRESS 4.3 STREET ADDRESS (-ST-ZIP 4.4 CITY-ST-ZIP E DELETE 5.1 YITLE AE 5.2 NAME EET ADDRESS 5.3 STREET ADDRESS (-ST-ZIP 5.4 CITY-ST-ZIP E DELETE 6.1 YITLE Change Addition AE 5.3 STREET ADDRESS (-ST-ZIP 5.4 CITY-ST-ZIP E DELETE 6.1 TITLE AE 6.2 NAME EET ADDRESS 6.3 STREET ADDRESS (-ST-ZIP) 6.3 STREET ADDRESS	or registe familiar w SNATURE f E E E E E E E E E E E E E E E E E AD R E E E AD R E E E AD R E E E AD R E E E E AD R E S S A A URE f a M A URE f a M A S NATURE f a M A S NATURE f a M A S NATURE f a M A S NATURE f a M A S NATURE f A D A S S NATURE f A D A S S NATURE f A D A S S S A S S S S S S S S S S S S S	PD PD PD HENNESSY, ROSE MARIA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Sand Directors SAND DIRECTORS BUDE, #4 DELETE	tutes, the above-named cor prized by the corporation's t tes. (NOTE: Registered Agent signature of 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS	rporation submits this statement for the purpose of changing its registered offic board of directors. I hereby accept the appointment as registered agent. I am
r-ST-ZIP 4.4 CITY-ST-ZIP EE DELETE 5.1 TitLe AE 5.2 NAME FET ADDRESS 5.3 STREET ADDRESS r-ST-ZIP 5.4 CITY-ST-ZIP LE DELETE 6.1 TitLE Change Addition ARE 0.1 TitLE LE DELETE 6.1 TitLE Change Addition AE 6.1 TitLE EET ADDRESS 6.3 STREET ADDRESS Y-ST-ZIP 6.3 STREET ADDRESS	or registe familiar w SNATURE * E E E E E E E E E E E E E E E E E E	PD PD PD HENNESSY, ROSE MARIA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Is and DIRECTORS BAND DIRECTORS DELETE ENUE, #4	tutes, the above-named con prized by the corporation's t tes. (NOTE: Registered Agent signature re 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST- ZIP 2 1 TIFLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST- ZIP 3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST- ZIP	poration submits this statement for the purpose of changing its registered affice board of directors. I hereby accept the appointment as registered agent. I am
ME 5 2 NAME LEET ADDRESS 5 3 STREET ADDRESS y - St - ZIP 5 4 Orty - St - ZIP LE DELETE DELETE 6 1 TiTLE ME 62 NAME ME 63 STREET ADDRESS Y - St - ZIP 63 STREET ADDRESS Y - ST - ZIP 64 Orty - ST - ZIP	or registe familiar w SNATURE * E E E E E E E E E E E E E E E E E E	PD HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLAR, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Is and DIRECTORS BAND DIRECTORS DELETE ENUE, #4	tutes, the above-named cor prized by the corporation's t es. 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME	poration submits this statement for the purpose of changing its registered affice board of directors. I hereby accept the appointment as registered agent. I am
K-ST-ZIP 5.4 CitY-ST-ZIP E DELETE 6.1 TitLE Change Addition AE 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS (-ST-ZIP) 6.4 CitY-ST-ZIP 6.4 CitY-ST-ZIP 6.4 CitY-ST-ZIP	or registe familiar w SNATURE * E E E E E E E E E E E E E E E E E A D R E E E E A D R E E E E T A D R E E E E T A D R E S S A T URE * * E E E E T A D R E SS A T URE * * E E E E T A D R E SS A T URE * * E E E E E T A D R E SS S A T URE * * E E E E T A D R E SS S A T URE * * E E E E T A D R E SS S S S S S S S S S S S S S S S S	PD HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLAR, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Is approved User Appicable IS AND DIRECTORS DELETE ENUE, #4 DELETE ENUE, #4	tutes, the above-named cor prized by the corporation's t tes. 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY-ST-ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY-ST-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP	rporation submits this statement for the purpose of changing its registered agent. I am
AE 6.2 NAME EET ADDRESS 6.3 STREET ADDRESS /- ST-ZIP 6.4 CITY - ST-ZIP	or registe familiar w SNATURE ' E E E E E E E E E E E E A E E E A C-ST-ZIP E E E E E E E A DORESS (-ST-ZIP E E E E E E E E E E E E E E E E E E E	PD HENNESSY, ROSE MARIE Sorture tried or priled name of reases OFFICER PD HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho Section 607.0505, Florida Slatu Is approved User Appicable IS AND DIRECTORS DELETE ENUE, #4 DELETE ENUE, #4	tutes, the above-named con prized by the corporation's t tes. EXAMPLE Foundation 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TIFLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TIFLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TIFLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TIFLE 5 2 NAME	rporation submits this statement for the purpose of changing its registered agent. I am
	or registe familiar w SNATURE * E E E E E E E E E E E E E E E E E E	PD HENNESSY, ROSE MARIE Sorture tried or priled name of reases OFFICER PD HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLARI, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho Section 607.0505, Florida Slatu aground Umet enpicate IS AND DIRECTORS DELETE ENUE, #4 DELETE ENUE, #4 DELETE DELETE	tutes, the above-named cor prized by the corporation's t es. (NOTE Repetered Agent signature or 13. 1 1 TIFLE 12 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TIFLE 2 2 NAME 2 3 STREET ADDRESS 2 4 CITY - ST - ZIP 3 1 TIFLE 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TIFLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TIFLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP	rporation submits this statement for the purpose of changing its registered agent. I am
	or registe familiar w SNATURE ' E E E E E E E E E E E E E E E E E E	ered agent, or both, in the State of with and accept the obligations of, Sordine: the of priving anne of regarge OFFICER PD HENNESSY, ROSE MARIE 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 VD SCULLAR, RITA 4181 NORTHWEST 1 AVE BOCA RATON FL 33431 STD GENOVESE, SAM 4181 NORTHWEST 1 AVE BOCA RATON FL 33431	f Fiorida. Such change was autho Section 607.0505, Florida Slatu aground Umet enpicate IS AND DIRECTORS DELETE ENUE, #4 DELETE ENUE, #4 DELETE DELETE	tutes, the above-named con prized by the corporation's t tes. EXAMPLE: Royaltered Agent separation 13. 1 1 TIFLE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 3 4 CITY - ST - ZIP 3 1 TITLE 3 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 6 1 TITLE 6 2 NAME	rporation submits this statement for the purpose of changing its registered agent. I am