## FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## FILED May 07, 2002 8:00 am Secretary of State

Daytime Phone #

DOCUMENT #				05-07-2002 90285 001 ***300.00			
HURLEY PEALESTA	to SALIS	1-Frc					
DO NOT WOLTE IN	T.U.O. O.D.						
DO NOT WRITE IN	THIS SP	ACE					
12. Principal Place of Business	ling Address	*.^					
Suite, Apt. #, etc. Suit				DO NOT WEITT IN THE SPACE			
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STVART FL	City & State			4. FS Number 6675	73/	Applied For Not Applicable	
34994 MARTIN ZIP	Zip Country			5. Certificate of Status Desired S8.75 Additional Fee Required			
		Name J	7.	Name and Address of Curren			
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9. The charge control and the first time.	<u> </u>	. 137	VA	R+	FL 3	4994	
The above named entity submits this statement for the purp	ose of changing its req	gistered office o	r registered	dagent, or both, in the State of F	orida.	_ ′	
SIGNATURE Signature, typed or printed name of registered agent and title if app	licable, (NOTE: Re	egistered Agent signati	ure required wh	on relostation)	4-25	-02	
9. This corporation is eligible to satisfy its Intengible	January 1 - May	1 Fee is \$150	0.00				
Tax filing requirement and elects to do so.  (See criteria on back)	Amended U	Fee is \$550.00 IBR is \$61.25		10. Election Campaign Fi Trust Fund Contribution	J	\$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTO	ake Check Payable RS	to Departmen	t or State			e i e e	
NAME HUDLEY BRUCE	= K.	TITLE NAME	i.			(12/01)	
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13. I hereby certify that the information supplied with this filing of indicated on this report or supplemental report is true and a of the corporation or the receiver or trustee empowered to	toes not qualify for the ccurate and that my si execute this renort as	exemption state ignature shall ha required by Ch	ed in Section eve the same apter 607	on 119.07(3)(i), Florida Statutes, in legal effect as if made under of Florida Statutes; and that my as	further certify that bath; that I am an o	the information fficer 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 on an attachment with an address, with all other like empowered.							
SIGNATURE: SIGNATURE AND TYPED OR PRIMATED NAME	OF SIGNING OFFICE BORD	OF MUKLI	=7_	4-25-02 Date	561-30	2-3029	