2002 Uniform Business Report (UBR)

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DOCUI 1. Entity Name ALICAN, I						Apr 02, 2002 8:00 am Secretary of State 04-02-2002 90092 025 ***150.00			
Principal Place of Business Mailing Address 340 ROYAL POINCIANA WAY 340 ROYAL POINCIANA WAY STE 316 STE 316						ិដ្ឋាភិទិស្ស			
	FL 33480-4020 lace of Business	PALM BEACH FL 33480-4 3. Mailing Address	.020						
One North Clematis St. One North Clematis St. Suite Apr. 200 Suite 200				t.	DO NOT WRITE IN THIS SPACE				
City & State	City & State City & State			65-11/19011		oplied For			
West Zip	West Palm Beach, FL West Palm Beac			FI NC		ot Applicable			
33401	· · · · · · · · · · · · · · · · · · ·	33401	,			ertificate of Status Desired	Fee Require		
	6. Name and Address of Current R	egistered Agent	Nar	ne .	7. Na	ame and Address of New Registere	d Agent		
TARR, WILLIAM I ESQ 340 ROYAL POINCIANA WAY STE 316				Same et Address (F One Nor	dame t Address (P.O. Box Number is Not Acceptable) One North Clematis St.				
PALM BEACH FL 33480				Suite 2	200				
			City	West Pa	ı 7 m I	Beach F	Zip Cod 3340		
8. The above	named entity submits this statement for	the purpose of changing its						,, , , , , , , , , , , , , , , , , , ,	
	•								
SIGNATURE _	Signature, typed or printed name of registered agent an	d title if applicable. (NOTE	E: Registered Agent	signature required	when rein	nstating) DAT	E		
9. This corporation is eligible to satisfy its Intangible. Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After May 1, 2002 Make Check Payable			02 Fee will b	e \$550.00	- 1	10. Election Campaign Financing Trust Fund Contribution.	☐ Added	May Be d to Fees	
11.	OFFICERS AND D		12.	lup -		DITIONS/CHANGES TO OFFICERS A			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FANJUL, CATHERINE 340 ROYAL POINCIANA WAY STE 316 PALM BCH FL 33480			ESS Wes	≘-Ño	1, Catherine rth Clematrs St., S Palm Beach, FL 33401	ŀ	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST ANJUL, ANDRES B 340 ROYAL POINCIANA WAY STE 316 PALM BEACH FL 33480			Far One	PST ☆ Change □ Addition danjul, Andres Bone North Clematis St, STE 200 West Palm Beach, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDF	ESS	3.	A.III. IA.IXAI J. J.	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDR	I .			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDR				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDF	IESS			☐ Change	Addition	
13. I hereby of indicated of the correctionaged	certify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empow or on an attachment with an address,	his filing does not qualify for rue and accurate and that n vered to execute his report the all other like amonwered	the exemption class required by		ction 1 same le ', Florid	19.07(3)(i), Florida Statutes. I further egal effect as if made under oath; tha la Statutes; and that my name appea	certify that the i it I am an office rs in Block 11 o	nformation or director r Block 12 if	

SIGNATURE:

(ကြုံးမြူေး B. Fanjul 3/4/02 561-655-6303

Daytime Phone #