FOR PROFIT CORPORATION

FILED Mar 11, 2002 8:00 am

DOCUMENT # P96000346001 VAE, INC.				Secretary of State 03-11-2002 90077 012 ***158.75
DO NOT WRITE IN THIS SPACE				-
2. Principal Place of Business 5601 North Dixie Highway		3. Mailing Address 5601 North Dixie Highway		
Suite Apt. #26		Suite, Apt. #, etc. Suite 420		DO NOT WRITE IN THIS SPACE
City & State Ft. Lauderdale, FL		 		4. FEI Number Applied For
Zip 33334	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional
33334	USA	33334	USA	7. Name and Address of Current Registered Agent
DO NOT WRITE IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its re			Street Address Suite 2455 City Ft. L	LIS, RICHARD K. ss (P.O. Box Number is Not Acceptable) e 320 International Building East Sunrise Boulevard Lauderdale FL Zip Code 33304 stered agent, or both, in the State of Florida.
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - Ma After May 1, Amended Make Check Payable			Registered Agent signature required by 1 Fee is \$150.00 1, Fee is \$550.00 1 UBR is \$61.25 le to Department of St	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P INGLIS, RICHARD K. 2455 East Sunrise B1 Ft. Lauderdale, FL 3	vd., Suite #320	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	
STREET ADDRESS CITY-ST-ZIP	ertify that the information supplied with the on this report or supplemental report in	this filing does not qualify for	STREET ADDRESS CITY-ST-ZIP the exemption stated in S	Section 119.07(3)(i), Florida Statutes, I further certify that the information as same legal effect as if made under path; that I am an officer or director

indicated on this report of supplier metal report is true and accurate and that my signature shall have the same legal effect as it made under oath; that i am an officer or director of the corporation or the receiver of my stee 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:

2/20/02

(954) 565-1977 Daytime Phone #