Principal Place of Business       JUPITER FL 33468-1083       DO NOT WRITE IN THIS SPACE         Principal Place of Business       Za, Maling Address       4. FCI Number       Auglet For.         State. Nucl. 4, otc.       Za       State. Apt. #, etc.       5. Certificate of Status Desired       Fac. Required         State. Nucl. 4, otc.       Zite       State. Apt. #, etc.       5. Certificate of Status Desired       Fac. Required         City 4 state       City 4 state       City 4 state       6. Elects in Campaign Financing       State. Status Desired       Fac. Required         City 4 state       Za       Country       Zite       State. Country       8. This statements       Address of Current Registered Agent       10. Namm: and Address of New Registered Agent       Fac. Required         RICHTER, FRANK M       11255 US ONE STE 265       Fat. States (PO. Bok Number is Not Acceptable)       Jupited for country       States Address for Current Registered Agent       10. Namm: and Address for Outrop take mediatement for the purpose of charging file registered agent         Paraulant to the provisions of States 600, USD: and 607, ISDB, Florida State face, the purpose of relating the experiment or the purpose of charging file registered agent in an instand with, and a crapt the colgations of States 600, Florid Registered Agent       10. Name         RAULES       DELETE       10. Charge       Address       10. Charge       Address <t< th=""><th>PF CORP ANNUA</th><th colspan="3">NOW: FILING FEE AFTER MAY 1ST IS \$550.00         ROFIT         ORATION         L REPORT         999</th><th colspan="3">FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90105 002 ***150.00</th></t<>	PF CORP ANNUA	NOW: FILING FEE AFTER MAY 1ST IS \$550.00         ROFIT         ORATION         L REPORT         999			FILED Apr 29, 1999 8:00 am Secretary of State 04-29-1999 90105 002 ***150.00				
Maining Address     PO. 103     PO. 80X 103     PO. 80X 103     DO NOT WRITE IN 1HIS SPACE       State 1, 35464 1033     JUPTER FL 35464 1033     DO NOT WRITE IN 1HIS SPACE     3. Date incorported or Qualified       OC 101966     2a.     Maining Address     4. EEI Number     1. Auglied Edit       State, Apt. R. etc.     5. Maining Address     4. EEI Number     1. Auglied Edit       State, Apt. R. etc.     5. Centrate of Status Doubled     Fee Required       City & State     0. Contrate     5. Centrate of Status Doubled     Fee Required       Zip     Country     2ip     Country     8. This coppation over a current vei Integrated Agent       Jup Country     Zip     Country     8. This coppation over a current vei Integrated Agent     10. Name and Address of New Registered Agent       Jup Country     Zip     Country     8. State State     10. Name and Address of New Registered Agent       Jup Country     Zip     Country     8. State State     10. Name and Address of New Registered Agent       Jup Country     Zip     Country     State Altress (P O. 6. K Number's Not Acceptable)     Jup Country       Jup Country     Zip     Coontry     State Altress (P O. 6. K Number's Not Acceptable)     Jup Code       Jup Country     Coontry     State Altress (P O. 6. K Number's Not Acceptable)     Jup Code       Loc Country <th>. corperation is</th> <th>adille</th> <th>)004940</th> <th>)5</th> <th></th> <th></th> <th>) I TANKARI DE JAKA BIRD ATRIC BERKETAN</th> <th>Talih didih dirih didih</th> <th></th>	. corperation is	adille	)004940	)5			) I TANKARI DE JAKA BIRD ATRIC BERKETAN	Talih didih dirih didih	
D (b) (103)	rincipal Place o	of Business	Mailing A	Idress					
Princip at Place of Business       2a. Mailing Address       4. FCI humber       A. Aptication         Suite, Apt. 8, etc.       23. Suite, Apt. 8, etc.       5. Centitate of Statuto Desired       Fair Required         City & State       City & State       5. Centitate of Statuto Desired       Fair Required         City & State       City & State       6. Electron Campaign Francings       S5.00 May Be         Zip       Country       Zip       Country       8. This corporation over site current yea Intergote         Zip       Country       Zip       Country       8. This corporation over site current yea Intergote         S. Name and Ad frees of Current Registered Agent       10. Name and Address of Now Registered Agent       10. Name and Address of Now Registered Agent         RichtTER, FRANK M       1425       Stote AT Johnes State of Floring Statutions, the statement for the support Jax.       Image: Stote AT Johnes State of Floring Statutions, the statement for the support of the seguence of charging is seguenced agent, or the interset of Stote Floring Statutions, Close Statutions, Cl	.O. BOX 1083 JPITER FL 33468	3-1083	P.O. BOX	1083				1 HIS SPACE	
201     201     65-069 1562     Instrumentation       Suite, Apt. R, etc.     27     Suite, Apt. R, etc.     27     State       Chy & State     Chy & State     8. Certificate of Status Desired     Face R-quired       Zip     Contrive     28     Contrive     5. Certificate of Status Desired     Face R-quired       Zip     Contrive     28     29     Contrive     5. Certificate of Status Desired     State R-quired       Zip     Control     Zip     Control     Control     State R-quired     State R-quired       29     29     29     20     Control     8. This corporation once the cuirent yeal intradiction       9. Name and Address of Current Registered Agent     10. Name and Address of Now Registered Agent     11. Name       RICHTER, FRANK M     1255     State S									
Suite. Yet. 8, etc.  Suite. Yet. 8, etc.  Suite. Apr. 9, etc.  Suite. Ap	Princir al Plac	e of Business	<u> </u>	Address				<u> </u>	
City & State       City & State <ul> <li>City &amp; State</li> <li>Stote Control Contro Control Control Control Control Contro Control Control</li></ul>	Suite, Apt. #,	etc.		Apt. #, etc.				\$8.75	Additional
Zip     Country     Zip     Country     Zip     Country     Zip       20     Country     Zip     Country     B. This Compression ones the current yeal intangible       9     Name and Address of Current Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of New Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of New Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of New Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of New Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of New Registered Agent     10. Name: and Address of New Registered Agent       1     Name and Address of Sciences 07.050; and BOT 1500; Flords Statutes, the above-named cirporation submits this statement for the purpose of changing its registered agent, or thin the Statu of Rolad. Stack theat Agent department was under the date of Tiporate agent or thin a date of the address of Nov Registered Agent     DRTE       1     Purpose or primes in the or trigoned agent of their agent agent adea of the date and or Section the Address address of Nov Registered Agent     DRTE       2     OFFECRS AN1 DIRECTORS     13     ADDITIO INSICHANGES TO OFFICIERS IN DIRECTORS IN 12       2     OFFECRS AN1 DIRECTORS     13     ADDITIO INSICHANGES TO OFFICIERS IN 12       2	City & State			State			6 Election Compaign Einancing		<u> </u>
25         29         30         Personal Property Tax.         1 Yes         No           9. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           RICHTER, FRANK M         11255 US NOR STE 265         31         Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           I 1255 US NOR STE 265         JUNO BECAH FL 33408         11         Street A Stress (P.O. Bot Number is Not Acceptable)         133           I - Organize to the provision of Science 607 0500: and 607 0505. Florids Statutes.         132         140         FL 185         121 Code           MIUFE         Signatus types optimem to a registered Agent was subtracted by the corporation submits. This state of the provision of Science 607 0505. Florids Statutes.         132         ADDITI/ INSICHANGES TO OFFICERS. NN D DIRECTORS IN 122.           GNATUFE         OFFICERS ANI DIRECTORS         100 Element Agent agent, types optimem to a registered Agent agent agent.         100 Element Agent agent, types optimem to a registered Agent agent.         100 Nectors I New Agent agent agent.         100 Nectors I New Agent agent agent.         100 Nectors I New Agent			28						
RICHTER, FRANK M 14255 US ONE STE 285 JUNO BECAH FL 33408     81       Addition     82       Street A Stress (P.O. Bok Number is Not Acceptable)       83       84       City       84       City       85       86       87.2P       98 </td <td></td> <td>25</td> <td>29</td> <td></td> <td> í</td> <td></td> <td>Personal Property Tax.</td> <td><u> </u></td> <td>₹No</td>		25	29		í		Personal Property Tax.	<u> </u>	₹No
14255 US ONE STE 285 JUNO BECAH FL 33408       Street Address (P.O. Box Number is Not Acceptable)         82       Street Address (P.O. Box Number is Not Acceptable)         83       84       City       FL       85       Zip Code         84       City       Floatestant American Statutes       Floatestant American Statutes       Floatestant American Statutes         80ATUFE       Signature types or preferent fixe of Representation and the approximation statutes       IDATE       IDATE         80ATUFE       DELETE       111TLE       IDATE       IDATE       IDATE         80ATUFE       DELETE       111TLE       IDATE       IDATE       IDATE         80ATUFE       DELETE       215MEET ADDRESS       IDATE       IDATE       IDATE       IDATE<			rrent Registered A	gent	81	Name	10. Name and Address of New Regist	erea Agent	
JUNO BECAH FL 33408					82	Street A 1d	ress (P.O. Bo < Number is Not Acceptable)		
Pursuarin to the provisions of S-ctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or an endiance to registered agent, or an endiance to the purpose of change was authorized by the corporation's board of directors. I hereby accept the apriorithment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SNATUF: Stipation, types or printed the to diregatance agent and the directors. I hereby accept the apriorithment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  OFFICERS ANI DIRECTORS  I TITLE  OFFICERS ANI DIRECTORS  I TITLE  OFFICERS ANI DIRECTORS  I TITLE  OFFICERS ANI DIRECTORS  Additio EETAODESS  Sold WINDING LAKE DR  DELETE  I TITLE  Change Additio EETAODESS  SIZEP  DELETE  SITUE  E  DELETE  I TITLE  Change Additio EETAODESS  SIZEP  DELETE  I TITLE  Change Additio EETAODESS  SIZEP  DELETE  EETAODESS  SIZEP  DELETE  I TITLE  Change Additio EETAODESS  SIZEP  DELETE  I TITLE  Change Additio EETAODESS  SIZEP  DELETE  SITUE  Change Additio EETAODESS  SIZEP  DELETE  SITUE  Change Additio EETAODESS  SIZEP  DELETE  SITUE  Change Additio EETAODESS  SIZEP  DELETE  SITUE  EETAODESS  SIZEP  DELETE  SITUE  Change Additio EETAODESS  SIZEP  CONSTRUCTURE  SIZEP  CONSTRUCTURE  SIZE  SIZEP  CONSTRUCTURE  SIZEP  SIZEP  SIZEP  SIZEP					83				
office or registered agent, or both, in the State of Florida. Such change was authorized by the corportition's board of directors. I hereby accept the approximent as registered agent. Tam familiar with, and accept the obligation of 3.5005, Florida Statutes.         GNATUFE       Signature. types or printed mine of regulation of 3.5005, Florida Statutes.         OFFICERS ANI DIRECTORS       13.         LUCIA, PETER       OFFICERS ANI DIRECTORS         6301 WINDING L/KE DR       13.3KREETAORESS         JUPITER FL 33458       14.CTV-51-ZIP         LE       DELETE         12.       Change         Addition       23.5KREETAORESS         V:S1-2P       DELETE         LE       DELETE         LE       DELETE         LE       DELETE         23.5KREETAORESS       24.CTY-51-ZIP         LE       DELETE         Addition       23.5KREETAORESS         Y:S1-2P       DELETE         LE       DELETE         ACTY-57-ZIP       Change         LE       DELETE         S33TREETAORESS       S33TREETAORESS         Y:S1-2P       Change         LE       DELETE         LE       DELETE         S177-2P       Change         LE       DELETE					84	City		85 Zip	Code
GNATUFE Signature typind or printed in the of regularinol again and this in applicable OFFICERS ANI) DIRECTORS I OFFICERS ADDRESS OFFICERS ADDRESS SIGNATION OFFICERS SIGNATION OFFICERS SIGNAT	1. Pursuant to	the provisions of Sections 607	.0502 and 607.1508	, Florida Statute	s, the above	e-named corp	poration submits this statement for the purpo	se of changing its	registered
Stearure types or private in the of regulared agent and talls of applicable         (NO E: Repletered Agent signature reg. into when reinitating)         DATE           2:         OFFICERS AN1) DIRECTORS         13:         ADDITI/ INS/CHANGES TO OFFICERS IN DIRECTORS IN 12           VE         D         DELETE         11TITLE         Change         Addition           VE         LUCIA, PETER         13:STREET ADDRESS         Change         Addition           V:ST.2p         JUPITER FL 33458         13:STREET ADDRESS         Change         Addition           V:ST.2p         DELETE         DELETE         11TITLE         Change         Addition           V:ST.2p         21:XVE         23:STREET ADDRESS         23:STREET ADDRESS         Change         Addition           V:ST.2p         24:CITY-ST.2p         24:CITY-ST.2p         Change         Addition           KEET ADDRESS         23:STREET ADDRESS         Change         Addition           V:ST.2p         34:CITY-ST.2p         Change         Addition           KEET ADDRESS         33:STREET ADDRESS         Change         Addition           V:ST.2p         34:CITY-ST.2p         Change         Addition           KEET ADDRESS         33:STREET ADDRESS         Change         Addition           V:ST	office or regi agent. I am	istered agent, or both, in the Si familiar with, and accept the of	tate of Florida. Such bligat ons of, Section	n change was au n 607.0505, Flori	thorized by da Statutes	the corporati	on's board of directors. Thereby accept the	appointment as re	çıstered
LE DELETE ITTLE Change Addition WE LUCIA, PETER 6301 WINDING LAKE DR 1.5T-2P JUPITER FL 33458 LE Change Addition WE 21 MARE V.ST-2P LE CHANGES V.ST-2P LE CHANGES V.ST		nature, typed or printed name of registered	d agent and title if applicabl	e (NOT ::	Registered Ager	t signature require	d when reinstating) DA	TE	
WE       LUCIA, PETER       12 NAME         G301 WINDING LAKE DR       13 STREET ADDRESS         V-ST-ZIP       JUPITER FL 33458       14 CTV-ST-ZIP         UE       DELETE       21 TITLE         WE       23 STREET ADDRESS       24 CTV-ST-ZIP         V-ST-ZIP       DELETE       21 TITLE         WE       23 STREET ADDRESS       24 CTV-ST-ZIP         V-ST-ZIP       2.4 CTV-ST-ZIP       Change         AE       DELETE       31 TITLE         V-ST-ZIP       2.4 CTV-ST-ZIP       Change         KEET ADDRESS       2.3 STREET ADDRESS         V-ST-ZIP       2.4 CTV-ST-ZIP         LE       DELETE       31 TITLE         V-ST-ZIP       2.4 CTV-ST-ZIP         LE       DELETE       3.1 TITLE         V-ST-ZIP       2.4 CTV-ST-ZIP         LE       DELETE       4.1 TITLE         V-ST-ZIP       4.4 CTV-ST-ZIP         KEET ADDRESS       4.3 STREET ADDRESS         V-ST-ZIP       4.4 CTV-ST-ZIP         LE       DELETE       5.1 TITLE         V-ST-ZIP       4.1 CTV-ST-ZIP         KEET ADDRESS       5.3 STREET ADDRESS         V-ST-ZIP       5.3 STREET ADDRESS <td< td=""><td></td><td></td><td>AND DIRECTORS</td><td></td><td></td><td></td><td>ADDITIONS/CHANGES TO OFFICE</td><td></td><td></td></td<>			AND DIRECTORS				ADDITIONS/CHANGES TO OFFICE		
Set AdDRess       6301 WINDING LAKE DR       13 STREET ADDRESS         JUPITER FL 33458       14 CTY-ST-ZIP         LE       DELETE       21 TITLE         VST-ZIP       22 NAME         VST-ZIP       2.3 STREET ADDRESS         Y-ST-ZIP       2.4 CTY-ST-ZIP         VE       2.3 STREET ADDRESS         Y-ST-ZIP       2.4 CTY-ST-ZIP         VE       3.1 TITLE         ME       DELETE         STREET ADDRESS       3.2 STREET ADDRESS         Y-ST-ZIP       3.1 TITLE         ME       3.2 STREET ADDRESS         Y-ST-ZIP       3.1 TITLE         ME       3.2 STREET ADDRESS         Y-ST-ZIP       3.4 CTY-ST-ZIP         LE       DELETE         Y-ST-ZIP       3.4 CTY-ST-ZIP         LE       DELETE         V-ST-ZIP       3.4 CTY-ST-ZIP         LE       DELETE         V-ST-ZIP       4.3 STREET ADDRESS         Y-ST-ZIP       4.3 STREET ADDRESS         Y-ST-ZIP       4.3 STREET ADDRESS         Y-ST-ZIP       4.4 CTY-ST-ZIP         LE       DELETE       5.1 TITLE         VER ADDRESS       S.3 STREET ADDRESS         Y-ST-ZIP       5.4 CTY-S	-					}			
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SIGNATURE:	SIGNATURE AND TYPED OR PRIVIED NAME OF SIGNING OFFICER OR	MAS DIRECTOR
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