FILED

*2001 UNIFORM BUSINESS REPORT (UBR)

Apr 14, 2001 8:00 am Secretary of State DOCUMENT # **P96000071981** 1. Entity Name LHBC HOLDINGS, INC. 04-14-2001 90011 041 ***150.00 Principal Place of Business Mailing Address 7777 GLADES ROAD STE 410 7777 GLADES ROAD STE 410 BOCA RATON FL 33434 **BOCA RATON FL 33434** 2. Principal Place of Susiness 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 62-1652188 Not Applicable Zip Zip Country Country \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOYOS, JEFFERY Street Address (P.O. Box Number is Not Acceptable) 7777 GLADES RD **STE 410 BOCA RATON FL 33434** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State П ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12 ☐ Delete TITLE TITI F Change Addition NAME WIENER, ELLIOT M NAME STREET ADDRESS 7777 GLADES ROAD STE 410 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** TITLE ☐ Delete TITLE ☐ Change WEST, ALFRED G NAME NAME STREET ADDRESS 7777 GLADES ROAD STE 410 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** ☐ Delete TITLE ☐ Change ☐ Addition TIT! F ERY NAME HOYOS, JEFFREY NAME STREET ADDRESS STREET ADDRESS 7777 GLADES ROAD STE 410 CITY-ST-ZIP CITY-ST-ZIP **BOCA RATON FL 33434** ☐ Delete TITL F TITI F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental seport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or flustely empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an add with all other like ep-

SIGNATURE: _

SIGNATURE AND TYPED O PRINTED NAME OF SIGNING OFFICE

Jeffery Hoyos 2/14/01