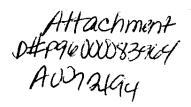
FILED DOCUMENT #P96000003964 May 30, 2001 8:00 am Secretary of State 1. Entity Name 05-30-2001 90032 007 ***150.00 LAW Office of MERL BURSTYN, 9550c iAtes PAP Principal Place of Business Mailing Address 44W Hasters+ \$2200 Spmc M.Ami, 7 33,38 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State City & State Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MERL DARYLL. 44 W Flagler St Suite2200 Street Address (P.O. Box Number is Not Acceptable) Hiami 7 33130 Zip Code FL 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 Si :nature, typed or printed name of registered agent and title if applicable. (NOTE egistered Agent signature required when reinstating) DATE FILE NOW! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Fee will be \$550.00 to Department of State Tax filing reciuirement and elects to do so. After MAY 1, 200 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payabi 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change Addition CR2E034 (11/00) TiTLE ☐ Delete TITLE JERL DARYL L VY W Fragier St Ste 2200 J'AM! FZ 33180 NAME NAME STREET ADDRESS STREET ADDRES CITY-ST-7IP CITY - ST - ZIE ☐ Delete Change noitibt A 🔲 TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Delete Change ☐ Addition TITLE 11116 NAME NAME STREET ADDRESS STREET ADDRES 3 CITY-ST-ZIP CITY-ST-7IP ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition HITLE TITLE MAME NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change STREET ADDRESS STŘEET ADDRESS DITY-ST-7IP CITY-ST-ZIP does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information faccurate and that r y signature shall have the same legal effect as if made under oath; that I am an officer or director of execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if her like empowered. I hereby certify that the information supplied indicated on this report or supplemental of the corporation or the receiver or trustee empehanged, or on an attachment with an address SIGNATURE: _ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER R DIRECTOR





MERL, BURSTYN & ASSOCIATES, P.A.

DARYL L. MERL DAVID H. BURSTYN JONATHAN R. FRIEDLAND SUITE 2200 COURTHOUSE TOWER 44 WEST FLAGLER STREET MIAMI, FLORIDA 33130 MIAMI (305) 372-8535 BROWARD (954) 779-3441 FAX (305) 371-9603

Web Site: www.lawyers.com/meribur E-Mail; lawmerl@aol.com

ELKINS AND FREEDMAN

April 26, 2001

Department of State Annual Reports Filings P O Box 1500 Tallahassee, FL 32302-1500

Re: P96000083964

To Whom it may concern:

Enclosed is our check #6829 in the amount of \$150.00 to be applied to the Annual Report. We never received the form for this year.

Please review your records and advise the status our form.

Sincerely,

Daryl Merl

DLM.mg