NAME JOHNSON, DARWIN J NAME STREET ADDRESS 9240 MERRIMOOR BLVD STREET ADDRESS CITY-ST-2IP LARGO FL 34647 CITY-ST-2IP TITLE STD Delete NAME LANGAN, RONALD O NAME STREET ADDRESS 2713 26TH AVE N CITY-ST-2IP TITLE ST PETERSBURG FL 33713 CITY-ST-2IP TITLE VPD Delete TITLE VPD Delete TITLE STREET ADDRESS CITY-ST-2IP TITLE ST PETERSBURG FL 33713 CITY-ST-2IP TITLE VPD Delete TITLE VPD Delete NAME STREET ADDRESS CITY-ST-2IP TITLE VPD Delete TITLE VPD Delete TITLE VPD CITY-ST-2IP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP TITLE NAME STREET ADDRESS CITY-ST-2IP CITY-ST-2IP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-2IP TITLE </th <th>DOCU 1. Entity Nar</th> <th>2 UNIFORM BUSI</th> <th>0086981</th> <th>RT (UBR)</th> <th></th> <th>FILF Apr 18, 200 Secretary 04-18-2002 90431</th> <th>)2 8:(of St</th> <th></th>	DOCU 1. Entity Nar	2 UNIFORM BUSI	0086981	RT (UBR)		FILF Apr 18, 200 Secretary 04-18-2002 90431)2 8:(of St		
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Zip Country Zip Country S. Centificate of Status Desired \$92.75 Assistment Free Proguined 5. Hame and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent JOHNSON, DARWN J 64126711 STREET NORTH ST. PERSBURG FL 33702 City FL Zip Code City FL Zip Code City FL Zip Code 6. The above named entry such its this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorda. Name State Address of New Registered Agent SIGNATURE The above named entry such its this statement for the purpose of changing its registered agent care tare analysis Inter Control (State Office Cont	City & Sta	te	City & State	3		4. FEI Number 59-34 10936			
	Zip	Country	Zip	Country	5. Cert	ficate of Status Desired	\$8.75 A	dditional	
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ST. PETERSBURG FL 33702 City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code	6412-9TH STREET NORTH ST. PETERSBURG FL 33702			Street Address (P.O. Box Number is Not Acceptable)					
SIGNATURE This corporation is eligible to satisfy its Intanglebe Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 After May 2, 2002 Fee will be \$550.00 After May 2, 2002 Fee will be \$550.00 After May 2, 2002 Fee will be \$550.00 Af									
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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 report 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 trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 12 in Block 13 in Block 12 in Block	NAME STREET ADDRESS		Delete	NAME STREET ADDRESS			🛄 Change	Addition	
changed, or on an attachment with an address with all other like empowered. SIGNATURE: X Caruran A Change DARWIN J. JOHNSON, PRESIDENT 3/04/02 (727) 521-2438	of the corr changed,	on dis report of supplemental report is in poration or the receiver or trustee empow or on an attachment with an address, with	Up and accurate and that my pred to execute this report as in all other like empowered.	signature shall have the strength of the stren	ie same legal 307, Florida Sl	effect as if made under oath; that I atutes; and that my name appears	am an office in Block 11 c	r or director r Block 12 if	