**FILED** 

## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

DOCUMENT # P96000098447  1. Entity Name BIRALA, INC.					Feb 05, 2002 8:00 an Secretary of State 02-05-2002 90053 031 ***150.00	n
·	e of Business	Mailing Address				
— <del>1238 JASMINE-CIRCLE</del>					11061	
2. Principal Place of Business  1900 South OCAN BAVA  Suite, Apt. #, etc.  3. Mailing Address 1900 South OC Suite, Apt. #, etc.			CEAN BAVA			И
# 90		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & Stat	ALE BY THE SEA, FLA.	City & State LANDERDALE BY 7	MESEA, A	iA	4. FEI Number 65-0714526 Applied For Not Applical	ole
- 33067	Country	Zip 33062	Country	- · · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired See Required See Required	
//	6. Name and Address of Current Re				7. Name and Address of New Registered Agent	
IOHANCE	*** *****		Name.	o HAN	SCIL WILLIAM M.	
JOHANSEN, WILLIAM M <del></del>				Street Address (P.O. Box Number is Not Acceptable) / 900 South o Charle Bhills,		
WESTON FL 33326			#9E			$\dashv$
			City	ndikdh	EBY THE SEA, FL Zip Code 33062	
8. The above	named entity submits this statement for t	he purpose of changing its re	egistered office o	r registered	agent, or both, in the State of Florida.	
SIGNATURE.	WILLIAM M. Scham SEN Signature, typed or printed name it registered agent and	PLESIARUT Sittle if applicable (NOTE:	Registered Agent signal	ture required wh	nen (einstation) /DATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable			Fee will be \$	550.00	10. Election Campaign Financing \$5.00 May Be Added to Fees	•
11.	OFFICERS AND DI		12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	_
TITLE	P	☐ Delete	TITLE		Change Addit	on 6
NAME	JOHANSEN, WILLIAM M 1238 JASMINE CIRCLCE		NAME	10	SOUTH OCCHI BLND. #9E	4 (9/
STREET ADDRESS CITY-ST-ZIP	WESTON FL		STREET ADDRESS CITY-ST-ZIP	1 '	EVALS BY THE SEA FLA 33062	S S S S S S S S S S S S S S S S S S S
TITLE	VP	☐ Delete	TITLE		☐ Change ☐ Additi	<u></u> 8
NAME STREET ADDRESS	JOHANSEN, MARYLIN J 1238 JASMINE CIRCLE		NAME STREET ADDRESS	1900	South OCEAN BAND. #9E	
CITY-ST-ZIP TITLE	WESTON FL S	☐ Delete	CITY-ST-ZIP	LANDER	Mrs. By This SeA, FLA 33.062.  Change Additional Add	
NAME	JOHANSE, WILLIAM M	□ Derete	NAME		<b>∠</b> Citalige ☐ Adult	UII
STREET ADDRESS CITY-ST-ZIP	1238 JASMINE CICRCLE WESTON FL		STREET ADDRESS CITY-ST-ZIP	1900 LANDS	SOUTH OCEAN BUILD. #9E WARE BY THE SEA FLA. 33062	
TITLE .	T IOUANCEN INTUINA M	☐ Delete	TITLE		☐ Change ☐ Additi	on
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NAME		L Destile	NAME		C Change C Additi	"
STREET ADDRESS			STREET ADDRESS			
CITY-ST-ZIP TITLE	<u>,                                      </u>	□ Delete	CITY-ST-ZIP		Change Additi	
NAME		LI Delete	NAME		L Citatige (1 Additi	/"
STREET ADORESS			STREET ADDRESS			
CITY-ST-ZIP	portification information according 19119	to filling along yes accepted to the	CITY-ST-ZIP		110 07(0V) Florido Otto Les IV	$\dashv$
indicated	on this report or supplemental report is tru	ue and accurate and that my	signature shall h	lave the san	on 119.07(3)(i), Florida Statutes. I further certify that the information ne legal effect as if made under oath; that I am an officer or director lorida Statutes; and that my name appears in Block 11 or Block 12	r I