

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000030259

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: AFB OF CHARLESTON, INC.

Current Principal Place of Business:

605 EAST DANIA BEACH BLVD.
DANIA, FL 33004

New Principal Place of Business:

629 NE 3RD STREET
DANIA, FL 33004

Current Mailing Address:

605 EAST DANIA BEACH BLVD.
DANIA, FL 33004

New Mailing Address:

PO BOX 606
DANIA, FL 330040606

FEI Number: 65-0750493

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYLE, VINCENT
605 EAST DANIA BEACH BLVD.
DANIA, FL 33004 US

Name and Address of New Registered Agent:

PYLE, VINCENT F
629 NE 3RD STREET
DANIA, FL 33004 US

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: VINCENT F. PYLE

05/01/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PYLE, VINCENT
Address: 605 EAST DANIA BEACH BLVD.
City-St-Zip: DANIA, FL 33004

Title: V () Delete
Name: PYLE, MARY E
Address: 605 EAST DANIA BEACH BLVD.
City-St-Zip: DANIA, FL 33004

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PYLE, VINCENT
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

Title: V (X) Change () Addition
Name: PYLE, MARY E
Address: 629 NE 3RD STREET
City-St-Zip: DANIA, FL 33004

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: VINCENT F. PYLE

P

05/01/2002

Electronic Signature of Signing Officer or Director

Date