Principal Place of Business Mailing Address			01 MAR -7 AM 8: 20		
					3751 W. Broward Blvd.
Plantation FL	33324		TALLADASSEE FLORI	DA	
Principal Place of Business 3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE		
City & State	City & State		4. FEI Number 65-0758153	Applied For Not Applicable	
Zip Country	Zip	Country		8.75 Additional ee Required	
6. Name and Address of Current I	Registered Agent		7. Name and Address of New Registered Ag	gent	
Steven Africk		Name .	Name		
2750 Stirrup Lane		Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
				Ì	
Weston, FL 33331		City	City FL Zip Code		
8. The above named entity submits his statement for	the purpose of changing its reg	gistered office or regis	stered agent, or both, in the State of Florida.		
Struck				(
SIGNATURE			2		
Signature, typed or gonted dayle of registered agent a	nd title if applicable. (NOTE: He	egistered Agent signature requ	uired when reinstating) DATE	_ 	
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 		FEE IS \$150.00 Fee will be \$550.0	1 Hust Fund Contribution.	\$5.00 May Be Added to Fees	
11. OFFICERS AND I		12.	ADDITIONS/CHANGES TO OFFICERS AND D	DIRECTORS IN 11	
TITLE PCCILLENT	. Delete	TITLE	900003828		
NAME CLOURS B. Atrick		NAME	-03/09/010	11086016	
STREET ADDRESS 8751 W. Brower	9 BIOG. 746 109	STREET ADDRESS	****300.00		
CITY-ST-ZIP Plantation, FL	33324	CITY-ST-ZIP			
TITLE Vice Prevident	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME Nanci Africk	BW1:5te 109	NAME.			
- 10 t		STREET ADDRESS CITY-ST-ZIP			
	33394			Change C Addition	
NAME	☐ Delete	TITLE NAME —	ا ۔	☐ Change ☐ Addition	
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			
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition	
NAME STREET ADDRESS		NAME STREET ADDRESS	, ()	1,21	
CITY-ST-ZIP		CITY-ST-ZIP	INI.		
TITLE		TITLE		☐ xoa ge ☐ Addition	
NAME '	CH DOUGH	NAME			
STREET ADDRESS		STREET ADDRESS		\mathcal{N}	
CITY-ST-ZIP		CITY-ST-ZIP			
13 I hereby certify that the information cumplied with	this filing does not qualify for the	e exemption stated in	Section 119.07(3)(i), Florida Statutes. I further certifine same legal effect as if made under oath; that I am	v that the information	

3-5-2001 · To whom it may concerni I did not receive notice for the year 2000. Please were the late I have enclosed a check for \$300 for year 2000 and Thank You. Nanci Africk SBA Holdings, Inc. 8751 W. Bround Blue 50/te 109 Plantation, FC 33304