2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

2002 UNIFORM BUSINESS REPORT (UBR)									FILED Feb 21, 2002 8:00 am					
1. Entity Nam	MENT # ORPORATION		P97000	0052635				Secretary of State 02-21-2002 90012 042 ***150.00						
Principal Plac	e of Business			Mailing Address										
701 BRICKELL AVENUE SUITE 3000 MIAMI FL 33131				701 BRICKELL AVENUE SUITE 3000 MIAMI FL 33131						VIA 11 141 44				
2. Principal P	ace of Busines	ss		3. Mailing Address						111 60 111 88 1			iar e i eia ieel	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE						
City & State				City & State				4. FEI Number 65-0761414 Applied For Not Applicable						
Zip	ip (,	Zip Coun		ntry	5. Certificate c		ificate of Status Desi			8.75 Add	itional	
	6. Name and Address of Current			gistered Agent		7. Name and Address of New Registered Agent								
						Name					· <u>···</u>		,	
			ENT CORPORA	TION	Street A	Street Address (P.O. Box Number is Not Acceptable)								
701 BRICKELL AVENUE SUITE 3000						<u> </u>				·				
MIAMI FL					City	FL Zip Code					•			
8. The above	named entity s	ubmits t	his statement for th	e purpose of changing its	reaister	ed office or	registered	agent.	or both, in the State	of Florida		! _		
				p p g g				3 ,			-		ļ	
SIGNATURE.	Signature, typed or	printed nam	ne of registered agent and	title if applicable. (NOTE	: Registere	d Agent signati	ure required who	en reinsta	ting)		DATE			
9. This corpo	ration is eligibl	e to sati	sfy its Intangible	FILE NOW!				T		- Ci				
Tax filing requirement and elects to do so. (See criteria on back)				After May 1, 2002 Fee will be \$550.0 Make Check Payable to Department of \$			50.00		 Election Campaig Trust Fund Contri 		ing 🔲		O May Be to Fees	
11.			OFFICERS AND DIF	<u> </u>	12.	eĥar anen		ADDIT	IONS/CHANGES TO	OFFICER	S AND D	IRECTORS	3 IN 11	
TITLE	PS		<u> </u>	☐ Delete	TITL		DPS					X Change	C. Addition	
NAME STREET ADDRESS	ABADI, RICHARD 701 BRICKELL AVENUE, STE. 30			NAP O STR		e Et address		DI, RICHARD BRICKELL AVENUE,			STE 3000			
CITY-ST-ZIP	MIAMI FL 33				-ST-ZIP	MIAM	MIAMI, FL 33131							
TITLE NAME	VPS PEISACH, G	ŧΑV	~	☒ Delete	TITL		DVPS	ACH	, GAY			X Change	[Addition	
STREET ADDRESS	701 BRICKE	LL AVE	NUE, STE. 3000		STRE			BRI	CKELL AVE	NUE,	STE	3000		
CITY-ST-ZIP	MIAMI.FL 33	3131		☐ Delete	—	-ST-ZIP	MIAM	Ι,	FL <u>33131</u>			Change	Addition (
TITLE NAME				☐ Delete	TITL NAM				•		Ĺ	Change	Addition	
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS - ST- ZIP								
TITLE				☐ Delete	TITL		.,_		<u></u>	-n.			Addition	
NAME				E Doloto	NAM						-			
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP								
TITLE		·· <u>·</u> ··		☐ Delete	TITL				· · · · · · · · · · · · · · · · · · ·		[Change	Addition	
NAME				<u>-</u>	NAM							•		
STREET ADDRESS CITY-ST-ZIP						ET ADDRESS -ST-ZIP								
TITLE				☐ Delete	TITL		_					Change	Addition	
NAME STREET ADDRESS					NAM	-								
STREET ADDRESS CITY-ST-ZIP				4		ET ADDRESS - St-ZIP								
13. I hereby of indicated of the corphanged.	ertify that the ir on this report o poration or the or on an attack	nformation or supple receiver nment wi	on supplied with the emental report is true or trustee empoyed the anyabdress, with	s filing does not qualify for the and accurate and that me tred to execute this report all other like empowered.	the exe ny signa as requi	mption stall ture shall h red by Cha	led in Section ave the sand opter 607, F	on 119. ne lega lorida S	07(3)(i), Florida Statu Il effect as if made ur Statutes; and that my	ites. I furt ider oath; name ap	her certify that I am pears in E	that the in an officer Block 11 or	formation or director Block 12 if	