	UNI DOCUN 1. Entity Name		IT CORPORESS REPORED	ATION T (UBR)	FILED Feb 07, 2003 8:00 am Secretary of State 02-07-2003 90086 020 ***150.00
Evite, Apl. #, otc.          CHECK HERE IF MAKING CHANGES          City & State          Clip & State           Clip & State           Clip & State           Clip & State           Clip & State           Applied Norm          Zip       Country       Zip       Country            Sc Certificate of Status Desired           Sc 755 Additional         Tes Registered Agent          MAKLAN, DAVD S           Clis S FEDERAL HWY           Street Address (PC, Box Number is Not Acceptable)          DEERFIELD BEACH FL 33441           City           Street Address (PC, Box Number is Not Acceptable)          Image: Street Address (PC, Box Number is Not Acceptable)           Street Address (PC, Box Number is Not Acceptable)          DEERFIELD BEACH FL 33441           City           Street Address (PC, Box Number is Not Acceptable)          Image: Figure Address and Street Address (PC, Box Number is Not Acceptable)           Street Address (PC, Box Number is Not Acceptable)          Image: Figure Address (PC, Box Number is Not Acceptable)           Street Address (PC, Box Number is Not Acceptable)          Image: Figure Address (PC, Box Number is Not Acceptable)           Street Address (PC, Box Number is Not Acceptable)          Image: Figure Address (PC, Box Num	Principal Place of Business     Mailing Address       616 S FEDERAL HWY     616 S FEDERAL HWY       DEERFIELD BEACH FL 33441     DEERFIELD BEACH FL 3			83441	
City & State City	2. Principal Place of Business 3. Mailing Address			<u> </u>	
Zip       Country       Zip       Country       S. Conflicate of Status Desired       S6.75 Additional Required         .6. Name and Address of Current Registered Agent       T. Name and Address of Current Registered Agent       T. Name and Address of New Registered Agent         MAKLAN, DAVD S G16 S FEDERAL HWY DEERFIELD BEACH FL 33441       Street: Address (PO, Box Number Is Not Acceptable)         DEERFIELD BEACH FL 33441       Street: Address (PO, Box Number Is Not Acceptable)         DEERFIELD BEACH FL 33441       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE       Street: Address (PO, Box Number Is Not Acceptable)         GMATURE		etc.	Suite, Apt. #, etc.	1	
Zp     Country     Zo     Country     S. Cortificate of Status Desired     58.75 Adductional Benefational Country       6. Name and Address of Coursent Registered Agent     7. Name and Address of New Registered Agent     7. Name and Address of New Registered Agent       MAKLAN, DAND S Bit 6 SEDERAL HWY DEERFIELD BEACH FL 33441     Status Desired     PL       City     FL     Zip Code       The above named areaty submits this statument for the purpose of changing its registered difice or registered agent, or both, in the State of Forida. Tam familiar with, and accept the colligations of registered agent.     Data       FLE NOW!II FEE IS \$150.00     Address (PO Box Number is Not Acceptable)     Data       Jonutin help 2 primer level and their 4 sectuals.     POTE Ingress Agent agent, or both, in the State of Forida. Tam familiar with, and accept the colligations of registered agent.     Data       FLE NOW!II FEE IS \$150.00     Atter May 1, 200 Fee with the \$550.00     State Advectored agent. or both, in the State of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with, and accept the collectores in a state of Forida. Tam familiar with and accept the collectores in a state of Forida. Tam familiar with addrestore in a state of Forida. Dispertinant o			City & State		4. FEI Number 65-0802927 Applied For Not Applicable
MAKLAN, DAVID S GIS S FEDERAL HWY DEERFIELD BEACH FL 33441       Street Address (PO, Box Number Is Not Acceptable)         City       FL       Zip Code         The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Fiorda. Lam familiar with, and acceptable is changing framework agent.       Deter registered agent, or both, in the State of Fiorda. Lam familiar with, and acceptable change of registered agent.         SNATURE	Zip			Country	5. Certificate of Status Desired S8.75 Additional
MAKLAN, DAVID S       Stroot Address (PO, Box Number Is Not Acceptable)         City       FL       Zip Code         City       FL       Zip Code         The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Forda. I an tamiliar with, and acceptable)       Entity         SNUTUE       Stroot Address (PO, Box Number Is Not Acceptable)       Data         PLE NOWILL FEE IS \$150.00       In the entity automation of registered agent, or both, in the State of Forda. I an tamiliar with, and acceptable         After May 1, 2003 Fee with the \$550.00       After May 1, 2003 Fee with the \$550.00       S. Election Compation Financing       S. S. 00 May Ba         After May 1, 2003 Fee with the \$530.00       In the MakLAN, DAVID S       In the MakLAN, DAVID S       S. Election Compation Financing       S. S. 00 May Ba         If Address Strop       OFFICERS AND DIRECTORS       11, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11       Change       Address         If Address Strop       OFFICERS AND DIRECTORS       In the MakLAN, DAVID S       Strop       Change       Address         If Address Strop       OFFICERS AND DIRECTORS       In the MakE ADDRESS       Change       Address         If Address Strop       OFFICERS AND DIRECTORS       In the MakE ADDRESS       Change       Address         If Address Strop       OfFICE		6. Name and Address of Current	Registered Agent	Name-	7. Name and Address of New Registered Agent
	MAKLAN, DAVID S 616 S FEDERAL HWY				s (P.O. Box Number is Not Acceptable)
SNATURE Index by index of index and the 4 september ages and the 4 september 4 ages and the 4 septembe				-	
#E       MAKLAN, DAVID S       Integer (Linerger (Linerge	ake Check Pi	ayable to Florida Department of OFFICERS AND I	DIRECTORS	11.	Trust Fund Contribution.   Added to Fees
AE       International boots       Internaternationa boots       Internaternational boots	ME <b>M</b> IEET ADDRESS <b>6</b>	MAKLAN, DAVID S 116 S FEDERAL HWY	Delete	NAME STREET ADDRESS	
E       Interview of the 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	e Et address		Deleté	NAME STREET ADDRESS	Change Addition
T ADDRESS ST-ZIP	T ADDRESS		Delete	NAME STREET ADDRESS	Change C Addition
ADDRESS       STREET ADDRESS         GT-ZIP       Delete         ID       Delete         TTLE       Change         ADDRESS       STREET ADDRESS         T-ZIP       Delete         ID       Delete         TTLE       Change         Addition         ADDRESS       STREET ADDRESS         T-ZIP       Change         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 does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		: 	Delete	NAME STREET ADDRESS	Change Addition
T ADDRESS ST-ZIP  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 in the two information is reported to the section 119.07(3)(ii).	T ADDRESS		Delete	NAME STREET ADDRESS	Change Addition
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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if	T ADDRESS ST-ZIP	A		NAME STREET ADDRESS CITY-ST-ZIP	
nenger, ei en ar ertebyljent minjan aderbeg, with an oner nike einpowered.	l hereby certif indicated on ti of the corpora changed, or c	y that the information supplied with the his report or supplemental report is to ation or the receiver of Pustee empower on an attackment withign address, with the supplement withigh address, with the supplement withigh address of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of the supplementation of supplementation of supplementat	his filing does not qualify for lue and accurate and that mi- rered to execute this report a th all other like empowered.	the exemption stated in Se y signature shall have the is required by Chapter 60	ection 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if