2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P98000001965



FILED Feb 18, 2003 8:00 am Secretary of State

	E. LEHMAN, P.A.		•			02-18-20	003 90097 027	***15	50.00
Principal Place of Business SUITE 3000. MIAM! CENTER 201 S BISCAYNE BLVD MIAMI FL 33131		SUITE 30 201 S BIS	Mailing Address SUITE 3000. MIAMI CENTER 201 S BISCAYNE BLVD MIAMI FL 33131						
2. Principa	al Place of Business	3. Mailing /	Address						
Suite, A	pt. #, etc.	Suite, Ap	ot. #, etc.						
City & Si	tate	City & Sta	ate		4.	FEI Number	HERE IF MAKING (
Zip	Country	Zip		Country				$-\Box$	Applied For Not Applicable
	6. Name and Address of Cur	Pront Registered As				Certificate of Status Desi		e Rediii	ired
		Helit negistered Ay	ent	Name	7.	Name and Address of N	ew Registered Ag	ent	
	N, GARY E			Ĺ		P.			
	3000, MIAMI CENTER BISCAYNE BLVD (Street Address (P.O. Box Number is Not Acceptable)				
	FL 33131				<u>-</u>				
•				City			FL	Zip Co	
the above	re named entity submits this stateme ations of registered agent.	ent for the purpose of	i changing its reç	gistered office or	registered ac	sent or both in the State of		,	
-SIGNATURE									
- <u> </u>	Signature, typed or printed name of registered a		(NOTE: Re	egistered Agent signatur	re required when re	einstating)	DATE		
F Afte Make Checl	FILE NOW!!! FEE IS \$150.00 or May 1, 2003 Fee will be \$550. k Payable to Florida Departmen	.00 nt of State	(NOTE: Re	ngistered Agent signatu	ire required when re	9. Election Campaigr Trust Fund Contribu	Financino	\$5.0 Added	00 May Be
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r hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 changed, or on an attachment in an affects, with all other like empowered.

SIGNATURE:

MAN PUBLIS CANEL SHAP MES