FILED

UN	IFORM BUSIN	ESS	REPORT	Γ (U	BR)	)		Apr 09	9, 2003	3 8:00	0 am
DOCU 1. Entity Nam	MENT # <b>P980</b> 0	0000						Secre	etary ( 003 90167 0	of Sta	te
Principal Place of Business 2141 SW 28 WAY FT LAUDERDALE FL 33312			Mailing Address 2141 SW 28 WAY FT LAUDERDALE FL 33312								
2. Principal P 4442 Suite, Apt.	Place of Business  NE 20Th AVI  #, etc.	12	Mailing Address 2 141 Stw 28 Way Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & Stat	e da	City	ys State On da	<u> </u>		_	4. FEI	Number <b>65-082</b>	3123	J No	plied For ot Applicable
3330	2 Country A	1	3317-	=Country	Δ		<b>5</b> . Cer	ificate of Status Des	ired 🔲	<b>-\$8:75</b> -Add Fee Require	litional
0000	6. Name and Address of Curren	Register	ed Agent	<u> </u>			7. Nan	ne and Address of I	New Registered		<del></del>
			<u>-</u>		Name						
RECHERT KEVIN											
2141 SW 28 WAY					Street Ad	ldress (F	P.O. Box I	Number is Not Acce	ptable)		
_	RDALE FL 33312										
I I LAUDE	HDALL IL SOOJE 19			L	City						
						•			FL	Zip Cod	Э
the obligat	named entity submits this statement files of registered agent.  Signature, typed or printed name of registered agent  ILE NOW!!! FEE IS \$150.00			Registered A					DATE	Tarrina Willi,	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Campai Trust Fund Conti	ibution. [	Added	May Be to Fees
10.	ÓFFICERS AND	DIRECTO	DRS	11.				IONS/CHANGES TO	OFFICERS AN		S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BECHERT, KEVIN 2141 SW 28 WAY FT LAUDERDALE FL 33312		Delete	TITLE NAME STREET A CITY-ST	ADDRESS - ZIP		1 54	" Becher	<u>-</u> -33712	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	☐ Delete	TITLE NAME STREET /	ADDRESS	VICE Ran 2141	ee (	esident Bechen 129 ung Indak, Fr	£ 3731-2	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A	ADDRESS			<u>.v</u>	<u></u>	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			□ Delete	TITLE NAME STREET A CITY-ST	ADDRESS					☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	□ Delete	TITLE NAME STREET A CITY-ST						Change	Addition

12. I 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 or 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 changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Delete

Change

☐ Addition