FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED May 01, 2003 8:00 am Secretary of State

DOCUMENT # P98000009514 1. Entity Name SUNF lorida Properties, #*150.00 DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 1 HOD JAMI: Ami TRoi J. HOD TAMI: Ami TRoi Suite, Apt. #, etc. City & State D. + E/ City & State D. + E/ Applied For		/	Secretary of State				
DO NOT WRITE IN THIS SPACE 2, Projected Place of Business 1 (Lop / Ami, Ami, Top) 3. Majoring Address 1 (Lop / Ami, Ami, Top) 3. Majoring Address 1 (Lop / Ami, Ami, Top) 3. Majoring Address 1 (Lop / Ami, Ami, Top) 3. Majoring Address 3. Control (Lop / Ami, Ami, Top) 3. Control (Lop / Ami, Ami, Top) 3. Majoring Address 3. Majoring Address 3. Majoring Address 3. Control (Lop / Ami, Ami, Top) 3. Control (Lop / Ami, Ami, Top) 3. Majoring Address 3. Majoring Address 3. Majoring Address 3. So, Namine and Address of Current Registered Agent Name Ame in Industry 4. Application of Log States of Current Registered Agent Name Ame in Industry 4. Application of Log States of Current Registered Agent Name Ame in Industry 4. Application of Log States of Current Registered Agent Name Address of Current Registered Agent Name Ame in Industry 4. Application of Log States of Current Registered Agent Name Ame in Industry 3. Application of Log States of Current Registered Agent Name Address of Current Registered Agent Name Agent	DOCUMENT # P98000009514 1. Entity Name SUNFlorida Properties, #	05-01-2003 90758 048 ***150.00					
Surie, April, Processing Suries April, Processing April	DO NOT WRITE IN THIS SPACE		90117403				
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Name A More of Current Registered Agent Name A Mer i / Auy 9 C/L Streek Address (P.O. Box hamber is Not Acceptable) 3. The above named entity submits this statement for the purpose of changing its registered office or registered algent, or both, in the State of Florida. I am familiar with, and obous the obligations of registered agent. SIGNATURE Signature. Note in present now in proposed some and two factorization. January 1. May 1 Fee it \$150,000 After May 1, Fee it \$150,000 After May 1, Fee it \$150,000 Ander May 1, Fee it M	Sin & State Port, FL North Port, FL		6508/62/4 Not Applicable				
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SIGNATURE January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$50.00 Amended URB is \$61.25 Make Check Payable to Florida Department of State 10.	Name and Address of Current Registered Agent Name A Meri/Awyer Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue						
Sopreture from the control agreement agreement agreement agreement agreement agreement appearation required variety in importance in a property of the part of the		egistered office or registe	red agent, or both, in the State of Florida. I am familiar with, and எ6cept				
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TILLE NAME STREET ADDRESS (CITY-ST-ZIP TILLE	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Billion Campaign Financing Added to Fees						
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP							
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	NAME STEVEN C. CHANCELY ETTREET ADDRESS 14/12/ TAM, Am. Terry	NAME STREET ADDRESS	·				
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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	NAME STREET ADDRESS	NAME STREET ADDRESS	DO NOT WRITE				
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attachment with an address, with all other like empowered.

SIGNATURE: Chen	Steven	C.	Ch.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING O	OFFICER OR DIRECTOR		-