FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Feb 20, 2002 8:00 am Secretary of State

1. Entity Name	MENT # P9800 RAGROUP INTERNATION	0011046 DNAL, INC.	02-20-2002	2 90177 031 ***158.75		
	DO NOT WRITE	E IN THIS SI	PACE	-		
	ace of Business FLANTIC STREET	3. Mailing Address 2101 ATLANTI	C STREET			
Suite, Apt. # #523	#, etc.	Suite, Apt. #, etc. #523		DO NOT WRITE IN THIS SPACE		
City & State MELBO			BEACH FL	4. FEI Number 59-3486273	Applied For Not Applicable	
^{Ζίρ} 32951-2	Country 465	Zip 32951-2465	Country	5. Certificate of Status Desired	\$8.75 Additional X Fee Required	
New York, Name of the own		2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	and the State of t	7. Name and Address of Current Regi	Istered Agent	
	Name CHR			TENSON, HARRY O III		
DUNUL WRITE			Street Address	is (P.O. Box Number is Not Acceptable) ATLANTIC STREET, #523		
	IN THIS SI	ACE	City MELBO	DURNE BEACH	FL 32951-2465	
	and the second s	a 1 cm of a bonding to	55, 6 2230	red agent, or both, in the State of Florida.		
9. This corpo	Signature, typed or printed name of registered agenoration is eligible to satisfy its Intangible equirement and elects to do so.	e January 1 - h After May	E: Registered Agent signature require May 1 Fee is \$150.00 1, Fee is \$550.00	10. Election Campaign Financi		
9. This corpo		e January 1 - h After May Amende	flay 1 Fee is \$150.00 1, Fee is \$550.00 d UBR is \$61.25	10. Election Campaign Financia Trust Fund Contribution.		
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIC	N	ΔΤΙ	IRE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARRY CHRISTENSON February 6, 2002

321-409-2551

Date

Daytime Phone #