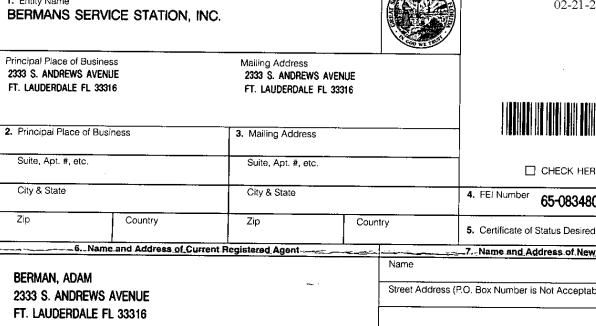
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P98000048141 DOCUMENT

1. Entity Name



FILED Feb 21, 2003 8:00 am Secretary of State

02-21-2003 90175 009 ***150.00

FT. LAUDERDALE FL 33316		FT. LAUDERDALE FL 33316		TARRIADA ING ALIAN INDIK ARAN ARAN ARAN BANK BANK ANAK ARAK		
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number 65-0834808	FEI Number 65-0834808 Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required \$8.75	Additional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent		
BERMAN			Name	The state of the s		
2333 S. /	ANDREWS AVENUE		Street Address (P.O. Box Number is Not Acceptable)			
FI. LAUD	DERDALE FL 33316		City			
8. The above	e named entity submits this statement for	r the purpose of changing its r) *	FL Zip C ered agent, or both, in the State of Florida. I am familiar wi		
SIGNATURE	tions of registered agent. : Signature, typed or printed name of registered agent.	and title if applicable. (NOTE:	Registered Agent signature require	ed when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					i.00 May Be ded to Fees	
10."	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	DDC INL+1	
TITLE · NAME STREET ADDRESS CITY-ST-ZIP	D BERMAN, ALAN 1780 NW 104TH AVENUE FT LAUDERDALE FL 33071	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chang		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERMAN, CAROLE 1780 NW 10TH AVE CORAL SPRINGS FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Chang	e 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERMAN, ADAM 1740 SW 67TH TERR PLANTATION FL 33317	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chang	e Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP	S BERMAN, DAVID 2333 S. ANDREWS AVENUE FT. LAUDERDALE FL 33316	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	e Addition	
ITLE		∏ Doloto	TITLE	["] 0		

10. OFFICERS AND DIRECTORS 11. AD TITLE -☐ Delete TITLE BERMAN, ALAN NAME 1780 NW 104TH AVENUE STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 33071 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete NAME BERMAN, CAROLE NAME STREET ADDRESS 1780 NW 10TH AVE STREET ADDRESS CITY-ST-7IP CORAL SPRINGS FL 33071 CITY-ST-ZIP TITLE Delete TITLE BERMAN, ADAM NAME NAME STREET ADDRESS 1740 SW 67TH TERR STREET ADDRESS CITY-ST-ZIP PLANTATION FL 33317 CITY-ST-ZIP TITLE ☐ Delete TITLE NAME BERMAN, DAVID NAME STREET ADDRESS 2333 S. ANDREWS AVENUE STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33316 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 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.

SIGNATURE: _

954.522-2835