## FILED Apr 22, 2002 8:00 am

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City & State  City & State  City & State  Country  Countr	2. Principal !	Place of Busine	ss	3. Mailing Address	" "		7		
Zip Country Zip Country	Suite, Apt. #, etc. Suite, Apt. #, etc.				<del></del>		DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent  KAHN, MORRIS  **  KAHN, MORRIS  **  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  City  FL  Zip Code  8. The above named entity submits this esterment for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTE Registered Agent explaint required when inshirately:  Signature, hode or printer agreed agent and size it agriculate.  OutTE Registered Agent explaint required when inshirately:  Signature, hode or printer agreed agent and size it agriculate.  OutTE Registered Agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTE Registered Agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTE Registered Agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTE Registered Agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTE Registered Agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State of Florida.  SIGNATURE  Explaint, hode or printer agreed and size it agriculate.  OutTe State agent, or both, in the State or Florida.  OutTe State agent, or both, in the State or Florida.  OutTe State	City & State					4. F	65-087754 <b>2</b>	<b>├</b>	
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100 JEFFERSON AVE STE 10001  MIAMI BEACH FL 33139  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Spotum, syred o printed name of registered stem and stem at star at spoketale.  P. This corporation is elligible to satisfy its Intangible (See criteria on back) of the purpose of changing its registered Agent Spotume required remarking)  P. This corporation is elligible to satisfy its Intangible (See criteria on back) of the purpose of changing its registered Agent Spotume required remarking)  P. This corporation is elligible to satisfy its Intangible (See criteria on back) of the purpose of changing its registered Agent Spotume required remarking)  P. This corporation is elligible to satisfy its Intangible (See criteria on back) of the purpose of changing its registered agent, or both, in the State of Florida.  P. This corporation is elligible to satisfy its Intangible (See criteria on back) of the purpose of changing its registered agent, or both, in the State of Florida.  P. This corporation is elligible to satisfy its Intangible (See Criteria on back) of the purpose of changing its registered agent, or both, in the State of Florida.  P. This corporation is elligible to satisfy its Intangible (See Criteria on back) of the purpose of changing its registered agent, or both, in the State of Florida.  10. Election Campaign Financing (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the purpose of Change (See Criteria on back) of the pur					Name				
STE 10001 MIAMI BEACH FL 33139  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE    Signature, typed or printed name of registered agent and site it applicable.   DATE Registered Agent spoulure incurred them revisable)   DATE	·				Street A	Address (P.O. Box Number is Not Acceptable)			
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CITY-ST-ZIP

SIGNATURE:

LOUGHATURE DECLURE HORRIS XAHO 4/1/02

<sup>13.</sup> 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 Block 12 it changed, or on an attachment with an address, with all other like empowered.