2001	UNIF	ORM E	BUSI	NESS REPO	RT	(UBR	<u>) </u>						
DOCU 1. Entity Nam	18	'		00 105 1	36		N		·	Ė	LED		
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Principal Plac	e of Business	_		Malling Address					S	ECRETA	RY OF S	TAT	<u>.</u>
	67141	Pines	131	'ud				0	TA	LLAHAS	SSEE, FLO)RIE)A
	Penb	rohe	Pia	18, FC 3	30	24		No.					
2. Principal P	Place of Business			3. Mailing Address					•				
Suite, Apt.	#, etc.		[Suite, Apt. #, etc.					DO NOT W	RITE IN TI	HIS SPACE		
City & State				City & State				4. FEI Number	65 099	780	7	_	
Zip				Zip	Coun	ry					Fee Rec		
	·		i			Name							· · · · · · · · · · · · · · · · · · ·
	•	i	ì			Street Add	tress (P	O. Box Number	is Not Accepte	ble)			· · · · · · · · · · · · · · · · · · ·
	I ONG Place of Business 6714 Pines Penbrohy 9 Icipal Place of Business e, Apt. #, etc. Country 6. Name and Address of C Hector R 3475 W		V. 7	lagus St.			~ 	GTUF PINES BLVD-					
	rt	lianu	12	33/34		ے ح	24	Fee Required 7. Name and Address of New Registered Agent Flec for R. Virans ress (P.O. Box Number is Not Acceptable) Colly Pines BUD- Cally Pines Bud-					
A 70 1			1	 ,		- /					TL T	33	024
8. The above	named entity su	DMITS THIS STE	itement for	the purpose of changing is	e registers	ICI OTICE OF IE	gistere	id agent, or both	, in the State of	Florida.			
SIGNATURE	<u> </u>												
	Signature, typed or ori	interi name of seci	stered ecent a	nd title if ennlicable (NO)	TE: Registered	Agent signature	required v	when reinstating)		D/	JE		
9. This corpo	- U.J.A.		1 1	nd site if applicable. (NO	KANSONISANITA ANTON	Agent eignature	STATE OF SELECTION AS	Commercial	tion Compoint	· ·		<i>E</i> 0	
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