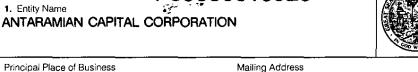
## 2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

## P99000010929 DOCUMENT #





**FILED** Apr 30, 2003 8:00 am Secretary of State

04-30-2003 90115 039 \*\*\*150.00

Principal Place of Business 365 5TH AVE. SOUTH. STE. 201 NAPLES FL 34102				Mailing Address 365 5TH AVE. SOUTH. STE. 201 NAPLES FL 34102								
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State				City & State			<b>4</b> . F	4. FEI Number 59-3564609 Applied Fo Not Applied				
Zip	Country			Zip	try	<b>5.</b> C	5. Certificate of Status Desired S8.75 Addition Fee Required					
	6. Name	and Address	of Current Regis	tered Agent				7. Name and Address of New Registered Agent				
						Name						
ANTARAMIAN, JACK J 365 5TH AVE. SOUTH, STE. 201				Street Addre			dress (P.O. Bo	ess (P.O. Box Number is Not Acceptable)				
NAPLES FL 34102						City	· · · · · · · · · · · · · · · · · · ·		FL	Zip Cod	le	
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. I am familiar with, and accept											and accept	
the obligations of registered agent.												
SIGNATURE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of				State				9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
10. OFFICERS AND				DIRECTORS 11.			ADI	DITIONS/CHANGES TO OFFICER	S AND D	IRECTOR	S IN 11	
TITLE	D	_		☐ Delete	TITLE					Change	Addition	
NAME	antarami	AN, JACK J			NAM	Ε				_		
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12. I hereby o	certify that the	information s	unnlied with this fil	ing does not qualify fo	or the exe	motion stated	d in Section 1	19.07(3)(i) Florida Statutes I furth	ner certify	that the i	nformation	

indicated on this report or supplemental egort is true and acceptate 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 truster 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 express, with all other type impowered.

**SIGNATURE:**