2000 UNIFORM BUSINESS REPORT (UBR)

OCUM Entity Name CW-21 SE			FILED May 15, 2000 8:00 Secretary of Stat									
Principal Place of Business Mailing Address 12 EAST ALSOBROOK STREET POST OFFICE BOX 3748 BUILE 3 PLANT CITY FL 33566-3748												
2. Principal Place of Business		3. Malli	3. Mailing Address									
Suite, Apt. #,	etc.	Suite	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
City & State		City & State			4. FEI N	umber 357273	 9	······································		lied For Applicable		
Zip Country		Zip		Country		 	licate of Status De			75 Addit	ional	
	6. Name and Address of Current	Registere	d Agent		Name	7. Name	and Address of	New Regis	tered Age	nt		
SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES FL 33134				- -	Street Address (P.O. Box Number is Not Acceptable)							
				t	City	-			FL	Zip Code		
(See criteria	PSTD HOOD, JOY S	DIRECTO	After MAY 1, 20 ake Check Payak	12. TITLE	partment of S	tate	Trust Fund Cor				to Fees (N 11	
	712 EAST ALSOBROOK STREE PLANT CITY FL 33566	l .	Delete	CITY-:	1		<u> </u>	···] Change	☐ Addition	
IAME STREET ADORESS CITY-ST-ZIP				NAME STREE CITY-	T ADDRESS ST-ZIP							
ITLE IAME TREET ADDRESS			☐ Delete	•	1 AODRESS ST-21P] Change	☐ Addition	
ITLE IAME ITREET ADDRESS ITY-ST-ZIP			Delete		T ADDRESS ST-ZIP	··· ·			C] Change	☐ Addition	
TITLE LAME STREET ADDRESS CITY-ST-ZIP	<u>,,</u>		☐ Delete	TITLE NAME STREE		 -			E	Change	Addition	
ITLE IAME STREET ADDRESS CITY-ST-ZIP			Delete	TITLE NAME STREE] Change	Addition	
13. I hereby of indicated of the cor	certify that the information supplied with on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address SURE:	powered to s, with all o	o execute this repoi	irt as requir d. SED	ed by Chapter	bu/, Florida	0.07(3)(i), Florida Sat effect as if mad Statutes; and that	ту пате а	7 <i>5</i>	SIOCK I I O	Block (24	