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2002 UNIFORM BUSINESS REPORT (UBR)

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6. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent FEINMAN, STEVEN A ESO. 8500 STATE ROAD 84 DAVIE FL 33324 8. The above named times submits this statement of the purpose of changing its registered agent, or both, in the State of Florida. Signature spose premo name of times agent and the Fauchable. (NOTE Registered Agent Agent agended Her Fauchable. (NOTE Registered Agent agended Her Fauchable.) 9. This corporation is eligible to actistly its intangable Tax king; grounderman and elects to do so. (See criteria on back) 10. Certification Campaign Financing Trust Fund Commodition. 35.00 May 86 Added for Fee Regulation Addition Make Check Payable to Department of State BASO STATE ROAD 84 DAVIE FL 33324 DAVIE FL 33324 DEPARTMENT ADMESS CITY 51-2P TITLE MAKE SIRET ADM	City & Stat	te		City & State			4 . F	El Number 65-0924 3	377		··	
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SIGNATURE Signature typed or primed name of try flowed agent and set if applicable. (NOTE: Registered Agent appratuse required when reinstalling)* DATE	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.											
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13. 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 if changed, or on an attachment with an andress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-08-02

954-474-3508 Daytime Phone #