2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P99000049764 DOCUMENT #



FILED Mar 07, 2003 8:00 am secretary of State

BAGWELL WILLIAM 11750 S.W. 95TH AVE. MAMI FL 33176-4251 SIGNATURE Special Consideration of registered agent more time apparated agent more time apparated agent more obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent or both, in the State of Florida. I am familiar with me obligations of registered agent	Applied For Not Applicable \$8.75 Additional Fee Required Agent Zip Code familiar with, and accept \$5.00 May Be Added to Fees DIRECTORS IN 11 Change Addition Change Addition
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6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable)	### Agent Zip Code
BAGWELL, WILLIAM 11750 S.W. 95TH AVE. MIAMI FL 33176-4251 City FL Zip C 6. 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 the obligations or registered agent. SIGNATURE SIGNATURE FILE NOW!! FEE IS \$150.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS TO OFFICERS 11. ADDITIONS/CHANGES TO OFFICERS TO OFFICERS 11. ADDITIONS/CHANGE	\$5.00 May Be Added to Fees DIRECTORS IN 11 Change Addition Change Addition Change Addition Change Addition
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12. I hereby certify that the information supplied with this filling 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 our distee 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 address, with all other like empowered.

SIGNATUR