FILED

2000 UNIFORM BUSINESS REPORT (UBR)

adams a		Apr 20, 2000 8 Secretary of 01-27-2000 90032 021 *							
rincipal Place		Mailing Address		-					
ISO RIDGEWOOD AVE DRT ORANGE FL 32127		5460 RIDGEWOOD AVE PORT ORANGE FL 32127-5628				3		-	
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. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address							
		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State		4. FEI Number 3579409 Applied For Not Applicable					
Zlp	Country	Zip	Count	try	5. Ce	ertificate of Status Desired		75 Addit Required	ional
	6. Name and Address of Curren	t Registered Agent		Name	7. Na	me and Address of New Re	gistered Agent	1	
ADAMS, MARVIN				Street Address (P.O. Box Number is Not Acceptable)					
5460 RIDGEWOOD AVE PORT ORANGE FL 32127				 					
				City	FL Zip Code				
. The above	named entity submits this statement	for the purpose of changing	its register	ed office or regist	ered age	nt, or both, in the State of Flori	da.		
									-
GNATURE _	Signature, typed or printed name of registered ager	rst and title if applicable. (N	VOTE: Registers	ed Agent signature requi	red when rein	istating)	DATE		
			2000 Fee	IS \$150.00 Will be \$550.00		10. Election Campaign Fina Trust Fund Contribution) May Be to Fees
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