## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P99000064248

1. Entity Name

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INTERAN	лькіс:д	13-1	PPM MP	CHIMP.

FILED Jun 06, 2000 8:00 am Secretary of State

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Principal Place	of Business	Mailing Address	<del></del>						
108 S.E. 8TH AVENUE SUITE 110 FORT LAUDERDALE FL 33301 2. Principal Place of Business		110 E. BROWARD BLVD. SUITE 610 FORT LAUDERDALE FL 33301-3504  3. Malling Address					ri Affice marca proc	e di pig sida. Dil	âhi işii izdi
					+				
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			DO NOT WRI	ITE IN THIS S	PACE		
City & State		City & State		4. FI	El Number		<u> </u>	oplied For	
Zip	Country	Zip	Coun	ntry		ertificate of Status Desired		8.75 Add	ditional
	6. Name and Address of Current	Registered Agent	-	1	7. N	ame and Address of New F	Registered A	gent	
			<b>.</b>	Name			<del></del>		
	IAS, PHILIP BROWARD-BLVD:	ے سے		Street Addres	s (P.O. Bo	x Number is Not Acceptable	е)		
SUITE								1	
10111	DAODENDALE I E 6000 I		ļ	City		1	FL	Zip Cod	e
8. The above n	named entity submits this statement fo	r the purpose of changing it	s registere	ed office or regis	tered age	nt, or both, in the State of Fi	orida.		
		•				1.			
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	TE: Registere	id Agent signature requ	ired when rein	istating) y	DATE		
Tax filing red	ration is eligible to satisfy its Intangible equirement and elects to do so.	After MAY 1, 2	000 Fee	1S \$150.00 will be \$550.00		10. Election Campaign Fit Trust Fund Contribution		\$5.0 Added	May Be
(See criteria		Make Check Paya		<u> </u>	ŀ	UTION OF THE OF	CICEGO AND	DIRECTOR	<u> </u>
11.	OFFICERS AND		12.	· · · · · · · · · · · · · · · · · · ·	ADL	DITIONS/CHANGES TO OFF	FICERS AND		Addition
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of the corporation of the receiver of trustee employeem to execute the report changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #