2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DGCU		· · · · · · · · · · · · · · · · · · ·	_				
1. Entity Nan	JMENT # P99000066 me	5777					
Principal Place of Business Mailing Address c/o Edward J. Pastucha same 57 Meadow Way Irvington, NY 10533					FILEED		
				OI MAY - 1 PM 12: 08 SEGRETARY OF ASTATE TABLIANASSES IPLORIDA			
2. Principal F	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Star	ate	City & State			FEI Number 58-2494295	├	oplied For ot Applicable
Zip	Country	Zip	Country	5. (Certificate of Status Desired	\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent		7, 1	Name and Address of New Registe	ered Agent	
Behrenfeld, Craig E. 601 Bayshore Blvd., Ste. 700 Tampa, FL 33606			Name Street A	ddress (P.O. B	ess (P.O. Box Number is Not Acceptable)		
			City	<u></u>		FL Zip Cod	e
			1				
8. The above	e named entity submits this statement for Signature, typed or printed name of registered agent		registered office of			DATE	
9. This corpo	·	and title if applicable. (NOTE:	Registered Agent signat FEE IS \$150. Fee will be \$5	ure required when re		9 _ \$5.0	0 May Be I to Fees
9. This corporate filing respective (See criter)	Signature, typed or printed name of registered agent forcation is eligible to satisfy its Intangible requirement and elects to do so, uria on back) OFFICERS AND	FILE NOW! After MAY 1, 200 Make Check Payabl	Registered Agent signat ! FEE IS \$150. ! Fee will be \$! e to Departmen 12.	oure required when re 00 550.00 t of State	10. Election Campaign Financing Trust Fund Contribution. DDITIONS/CHANGES TO OFFICERS	9 \$5.0 Added	I to Fees
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9. This corporate filing r (See criter 11. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered agent for action is eligible to satisfy its Intangible requirement and elects to do so. OFFICERS AND PD Toan, Robert c/o Edward J. Pa	FILE NOW! After MAY 1, 200 Make Check Payabl DIRECTORS Delete astucha Livington, NY Delete	Prepare Agent signate of the second s	ure required when re 00 550.00 t of State AD ASST.S Behren 601 Ba	10. Election Campaign Financing Trust Fund Contribution. DITIONS/CHANGES TO OFFICERS Sec afeld, Craig	9	S IN 11 Addition Addition
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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ASST. Secretary

Craig E. Behrenfeld 4/30/01 813/253-2020

Daytime Phone #