## 2002 Uniform Business Report (UBR)

## FILED May 02, 2002 8:00 am Secretary of State

1. Entity Name			0075250 *	ک با ق بر			05-02-2002 S	_		
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Principal Place	e of Business		Mailing Address							
7455 NW 7 PL	ACE		7455 NW 7 PLACE			Ì				
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		Country	Zip	Coun	try			<b>\$</b> 8	.75 Addi	
Ζiρ		Country	Σtþ	3001		<b>5</b> . C	Certificate of Status Desired		Required	
	6 Name:	and Address of Current Re	egistered Agent	L		7. N	lame and Address of New Registr	red Age	nt	
					Name					
FEDORE, E	DONNA				Chara Balaba	(B.O. B	ov Number is Not Assentable)			
7455 NW 7					Street Accre	\$\$ (P.U. D	ox Number is Not Acceptable)			
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MARGATE	FL 33003		·					<del>_</del>	Zip Code	
					City			FL	Zip Code	<b>'</b>
B The shows	anmod antibu	eubmite this statement for t	he purpose of changing its	register	ed office or real	stered age	ent, or both, in the State of Florida.			
S. The above	i ilaileo eility	SUDMING THIS STATEMENT TO	to perpose of error gray			. •				
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SIGNATURE.	Signature, typed o	y printed name of registered agent and	titile if soplicable. (NOT)	F: Registere	d Agent signature rec	uired when re	instation) [	ATE		— i
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Tax filing r		ble to satisfy its Intangible and elects to do so.	· · · · · · · · · · · · · · · · · · ·	!! FEE 02 Fee	IS \$150.00 will be \$550.0	00				O May Be to Fees
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indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as it 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 address, with all other like empowered.

SIGNATURE: