6. Name and SPIEGEL & UTRER/ 343 ALMERIA AVEN CORAL GABLES FL SIGNATURE Signeture, typed or pr J. This corporation is eligible Tax filing requirement and e (See criteria on back) 11. ITTLE NAME ROTH, EDWA 4818 WEST (C FORT LAUDE SVD NAME ROTH, ALISH	Country		.Country	4. FEL 5. Certi 7. Nam	DO NOT WRITE	IN THIS SPACE	
FORT LAUDERDALE FL 33319 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip City & State Zip Corean and Core	Country	FORT LAUDERDALE FL 3331 3. Mailing Address Suite, Apt. #, etc. City & StateZip egistered Agent	.Country Name Street	4. FEL 5. Certi 7. Nam	DO NOT WRITE	IN THIS SPACE	t Applicable litional
Suite, Apt. #, etc. City & State Zip C 6. Name and SPIEGEL & UTRER/ 343 ALMERIA AVEN CORAL GABLES FL 8. The above name SIGNATURE Signeture, typed or p/ Signeture, typed or p/ P. ,This corporation is eligible *Tax filing requirement and c (See criteria on back) 11. TITLE NAME STREET ADDRESS GITY-ST-ZIP FORT LAUDE TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Country	Suite, Apt. #, etc. City & State Zip egistered Agent	Name	4. FEL 5. Certi 7. Nam	DO NOT WRITE	IN THIS SPACE	t Applicable litional
City & State Zip C 6. Name and SPIEGEL & UTRER/ 343 ALMERIA AVEN CORAL GABLES FL 8. The above name: SIGNATURE Signature, typed or pr 9. JThis corporation is eligible Tax filing requirement and of (See criteria on back) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS	d Address of Current R A, P.A. NUE L 33134	City & State	Name	5. Certi 7. Nam	Number 9988 Ificate of Status Desired In and Address of New Reg	Required Required Apple No No Fee Required	t Applicable litional
Zip C 6. Name and SPIEGEL & UTRER/ 343 ALMERIA AVEN CORAL GABLES FL 8. The above name CORAL GABLES FL 8. The above name CORAL GABLES FL 9. This corporation is eligible Tax filing requirement and c (See criteria on back) 11. TITLE NAME STREET ADDRESS CITY - ST-ZIP NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP	d Address of Current R A, P.A. NUE L 33134	egistered Agent	Name	5. Certi 7. Nam	Ificate of Status Desired -	See Required	t Applicable litional
6. Name and SPIEGEL & UTRER/ 343 ALMERIA AVEN CORAL GABLES FL B. The above name of the second control of the s	d Address of Current R A, P.A. NUE L 33134	egistered Agent	Name	7. Nam	e and Address of New Reg	See Required	litional
SPIEGEL & UTRER 343 ALMERIA AVEN CORAL GABLES FL 3. The above name of the structure SIGNATURE Signeture, typed or pr 9. JThis corporation is eligible Tax filing requirement and of (See criteria on back) 11. ITTLE IT	VA, P.A. NUE L 33134		Street				
343 ALMERIA AVEN CORAL GABLES FL 8. The above name SIGNATURE	NUE L 33134	the surrose of changing its	Street		Jumber is Not Acceptable)		j
B. The above name of the street ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	$\rightarrow \Lambda$	the surrose of changing its i	City				
SIGNATURE Signature, typed or par 9. JThis corporation is eligible Tax filing requirement and co (See criteria on back) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Emits this statement for t	the ournose of changing its r				FL Zip Code	9
Signeture, typed or participation is eligible Tax filing requirement and e (See criteria on back) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MI- /IK		registered office	or registered agent,	or both, in the State of Florid	da.	
Tax filing requirement and e (See criteria on back) 11. 11. 11. 11. 11. 11. 11. 11	ited name of registered agent and	d title it applicable. (NOTE	Registered Agent sign	nature required when reinstati	ling)	DATE	
TITLE PTD ROTH, EDWA STREET ADDRESS CITY-ST-ZIP FORT LAUDE NAME STREET ADDRESS CITY-ST-ZIP FORT LAUDE TITLE NAME STREET ADDRESS CITY-ST-ZIP FORT LAUDE STREET ADDRESS CITY-ST-ZIP		FILE NOW! After MAY 1, 200 Make Check Payabl		\$550.00	0. Election Campaign Final Trust Fund Contribution.		O May Be to Fees
AAME ROTH, EDWA STREET ADDRESS INTY-ST-ZIP FORT LAUDE STREET ADDRESS CITY-ST-ZIP FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE FORT LAUDE STREET ADDRESS CITY-ST-ZIP	OFFICERS AND D		12.		IONS/CHANGES TO OFFIC		
NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP	ard Commercial Boule Erdale FL 33319	EVARD	TITLE NAME STREET ADDRES CITY-ST-ZIP	5		Change	Addition
TITLE IAME STREET ADDRESS CITY-ST-ZIP ITLE IAME STREET ADDRESS NTY-ST-ZIP	COMMERCIAL BOULE	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP_	3		🗌 Change	Addition
ITLE AME TREET ADDRESS ITY-ST-ZIP		Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP			Change	Addition
······		. Delete	TITLE NAME STREET ADDRES	3		Change	Addition
AME TREET ADDRESS		Delete	TITLE NAME STREET AODRES	3		Change	Addition
ITY-ST-ZIP ITLE IAME TREET ADDRESS ITY-ST-ZIP	<u> </u>	Delete	CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP	5		🗌 Change	Addition
 I hereby certify that the info indicated on this report of of the corporation or the re changed, or on an attacting 		his filing does not qualify for		tated in Section 119. I have the same lega hapter 607, Florida S	.07(3)(i), Florida Statutes. I f Il effect as if made under oa Statutes; and that my name	urther certify that the ir th; that I am an officer appears in Block 1) or 0 717. }	