DOCU	MENT # P99000	090182		3)	FILED Apr 24, 2001 8:00 ar Secretary of State 04-24-2001 90332 047 ***150.00	
Principal Place of Business 10211 W. SAMPLE RDSTE.212 CORAL SPRINGS FL 33065		Mailing Address 10211 W. SAMPLE RDSTE.212 CORAL SPRINGS FL 33065				
2. Principal P /2706 Suite, Apt.		3. Mailing Address /2 70 6 N/2 Suite, Apt. #, etc.	IPT RA	ଜେ	DO NOT WRITE IN THIS SPACE	
City & State		City & State	RINSS	4.	FEI Number 65-0956226 Applied For Not Applicabl	
Zip	071 Country USA	FZ 37071	Country USA		Certificate of Status Desired Status Desired	
1021	6. Name and Address of Currer ORMACK, THOMAS 1 W. SAMPLE RD.,STE.212 AL SPRINGS FL 33065		Name Street A	Micic	Name and Address of New Registered Agent CO.CMACIC THEMAS Box Number is Not Acceptable) ILI 18TH PLACE	
BIGNATURE _	named entity submits this statement	nt and title if applicable. (NOTE	registered office or CCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCCC	registered as	reinstating) DATE 10. Election Campaign Financing \$5.00 May Be	
. 0	equirement and elects to do so.	After MAY 1, 200 Make Check Payab		t of State	Trust Fund Contribution. L Added to Fees	
1. TLE AME TREET ADDRESS ITY- ST-ZIP	D MCCORMACK, THOMAS 10211 W. SAMPLE RD.,STE.21 CORAL SPRINGS FL 33065	Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP) M C C	DDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CREACIC, THOMAS NEW 1815 PLACE Change Addition NEW 1815 FL. 33071	
TLE Ame Treet address ITY-ST-ZIP		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		. Change Addition	
ile Me Reet address Ty-st-zip		Delete	TITLE NAMESTREET ADDRESS CITY-ST-ZIP	. · .	Change [] Addition	
'LE .ME REET ADDRESS IY - ST - ZIP		Delete	TITLE NAME Street Address City-St-Zip		🗌 Change 🔲 Addition	
ile Me Reet address Iy-st-zip		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Change 🗋 Addition	
'LE Me Reet adoress IY - St-Zip		🗖 Delete	TITLE NAME STREET ADDRESS CITY- ST-ZIP		· Change 🗌 Addition	
indicated of the corp changed,	ertify that the information supplied wi on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address URE:	is true and accurate and that m powered to execute this report a , with all other like empowered.	the exemption stat y signature shall h as required by Cha	ave the same pter 607, Flor	119.07(3)(i), Florida Statutes. I further certify that the information legal effect as if made under oath; that I am an officer or director rida Statutes; and that my name appears in Block 11 or Block 12 if $Feb 28^{TC} 2001$.	