

**FILED**  
**Apr 15, 2003 8:00 am**  
**Secretary of State**

0224412 AV

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number <b>65-0280541</b>	Applied For
	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

7. Name and Address of New Registered Agent

P.O. Box Number is Not Acceptable)	
FL	Zip Code

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E034 (10/02)

SIGNATURE: SIGNATURE REQUIRED 4/11/03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_