2000 UNIFORM BUSINESS REPORT (UBR)

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See and Address of Current Registered Agent 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name EVAN MARBIN & ASSOCIATES 48 E FLAGLER ST, PH #104 MIAMI FL 33131 City FL Zip Codi 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE 9. This corporation is eligible to satisfy its Intangible Tax Ring requirement and elects to do so. (See criteria on back) 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 13. TIME 14. CITY 51- Zip 15. CITY 51- Zip 16. Election Campaign Financing Trust Fund Contribution. Address Address 16. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 17. ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 18. The above named when renational 19. Election Campaign Financing Trust Fund Contribution. Address Address Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS 10. Election Campaign Financing Trust Fund Contribution. Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS Trust Fund Contribution. Charge Trust Fund Contribution. Address Address ADDITIONS/CHAINGES TO OFFICERS AND DIRECTORS Trust Fund Contribution. Address ADDITIONS/CHAINGE	itional
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I hereby certify that the information supplied with the filing loss put qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes, I further certify that the in	Additio
indicated on this report or supplemental report is true and accurate anothal my signature shall have the same legal effect as if made under oath; that I am an officer of the corporation or the receiver or trustee empryeers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or changed, or on an attachment with an additional suits all other like empowered.	Additio
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SIGNATURE : Date Daywing OF SIGNING OFFICER OR DIRECTOR Date Daywing Phone #	Additio