FILED Aug 01, 2002 8:00 am

0073914 A

1. Entity Nar		V4681(ESTMENT CO			/		Secretary of 08-01-2002 90163 038														
Principal Place of Business 2459 NE 98TH ST. ANTHONY FL 32617 2. Principal Place of Business Suite, Apt. #, etc			Mailing Address 250 AUSTRALIAN AVE. SO. S-1400 W PALM BCH. FL 33401 3. Mailing Address Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE															
											City & State			City & State			4. FEI Number 65-0358504 Applied Fo			oplied For	<u>-</u>
											Zip	Cou	ntry	Zip	Country		5. (Certificate of Status Desired		8.75 Add	ditional
	6. Name and A	ddress of Current Re	gistered Agent	<u> </u>		7. N	lame and Address of New Regist				┨										
					Name						1										
Brewer, W. Chester, Jr. 250 Australian Ave. So.				-	Street Address (P.O. Box Number is Not Acceptable)																
S-1400	`										1										
W PALM BCH. FL 33401					City			FL	Zip Cod	e	1										
9. This corporate filing	oration is eligible to s requirement and elec	name of registered agent and satisfy its Intangible ots to do so.	FILE NOW! After September 13	!! FEE IS 3, 2002 Fee	will be \$750.00		instating) to 10. Election Campaign Financin Trust Fund Contribution.	ATE	\$5.0 Added	0 May Be											
(See criteria on back) OFFICERS AND				RS 12.			DITIONS IS TO SET OF THE PARTY				1										
TITLE NAME: STREET ADDRESS CITY-ST-ZIP	DP ST. DENIS, TOM PO BOX 928 DAYTON OH 454		Delete	TITLE NAME STREET A		ADI	DITIONS/CHANGES TO OFFICERS		Change	Addition	CR2E034 (4/02)										
TITLE NAME			☐ Delete	TITLE			-		☐ Change	Addition	CB2										
STREET ADDRESS	ļ. .	- ~	-	- STREET A		-				_											
TITLE		· · · · · · · · · · · · · · · · · · ·	Delete	TITLE	· ZIF				7 Chares	Addition	-										
NAME STREET ADDRESS CITY-ST-ZIP			∟ Delete	NAME STREET A				L	☐ Change	Addition											
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET A CITY-ST-		•			☐ Change	☐ Addition											
TITLE NAME STREET ADDRESS	!		☐ Delete	TITLE NAME STREET A	DORESS] Change	Addition											

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trusted 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.

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

TITLE

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

omotes benies,

☐ Delete

2002 UNIFORM BUSINESS REPORT (UBR)

29 tel oa

or 2 if Addition

Change