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## **DOCUMENT # V56088 FILED** 1. Entity Name Jan 17, 2001 8:00 am Secretary of State WICH, WICH & WICH, P.A. 01-17-2001 90084 016 \*\*\*150 00 Mailing Address Principal Place of Business SUITE # 620 - COASTAL TOWER SUITE # 620 - COASTAL TOWER 2400 EAST COMMERCIAL BLVD. 2400 EAST COMMERCIAL BLVD. FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 IIS 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0349484 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WICH, THOMAS M. ESQ. - -Street Address (P.O. Box Number is Not Acceptable) SUITE 620 - COASTAL TOWER 2400 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308 City Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS TIT! F ☐ Delete TITLE Change Addition WICH, DONALD A. JR. NAME STREET ADDRESS STREET ADDRESS 3076 NW 49TH STREET CITY-ST-ZIP CITY-ST-ZIP FT. LAUDERDALE FL ☐ Addition **VDS** Change TITLE ☐ Delete TITLE NAME WICH, THOMAS M NAME STREET ADDRESS STREET ADDRESS 7340 NW 44TH LANE CITY-ST-ZIP CITY-ST-ZIP COCONUT CREEK F ☐ Addition VDT ☐ Delete TITLE TITLE WICH JAMES STREET 2864 N.E. 35 5 STREET NAME NAME WICH, JAMES STREET ADDRESS 821 SE 16TH COURT STREET ADDRESS LIGHTHOUSE POINT, FL 33064 CITY-ST-ZIP CITY-ST-ZIF DEERFIELD BEACH FL 33441 ☐ Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 trustee 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 an other like empowered. DONALD A. WICH, JR. PRES, 01-09-01 SIGNATURE: \( \)