0442753

			ORT (UBR)		FILED May 14, 2001 Secretary of 05-14-2001 90191 024 ***	
PALM BEACH FL 33480 500 5TH AVE 2700		Mailing Address C/O PEYSER & ALEXAND 500 5TH AVE 2700 NEW YORK NY 10110	EYSER & ALEXANDER H AVE 2700		אָר פ יש	211
2. Principal Pl	ace of Business	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State	City & State		13-4032099	Applied For Not Applicable
Zip	Country	Zip	Country	5. Ce		8.75 Additional
	6. Name and Address of Curr	ent Registered Agent		7. Na	ame and Address of New Registered Ag	
8. The above	TO AUTH	nt for the purpose of changing of the purpose of changing of the purpose of changing on the purpose of the purp	City Janus Fallers	istered age	FL nt, or both, in the State of Florida. $\mathcal{H}/\mathcal{Z}$	zip Code 6 /2001
9. This corpo	Signature, type of the plane of registered expressions is eligible to satisfy its Intangue of the control of th	After MAY 1,	OTE: Registered Agent signature rec W!!! FEE IS \$150.00 2001 Fee will be \$550. vable to Department of	00	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11.	OFFICERS A	ND DIRECTORS	12.	ADI	DITIONS/CHANGES TO OFFICERS AND I	
TITLE NAME STREET ADDRESS CITY-ST-ZiP	PATTERSON, JAMES 686 ISLAND DR PALM BEACH FL 33480	Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change ☐ Addition
TITLE		Delete	TITLE			Change Addition

NAME

13. I hereby certify that the information supplied with his fling 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 supplied fling report is further 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 receive/or trylee simpley first 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 receive/or trylee simpley first a required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 in changed, or on an attachment with an address in the surface.

212 - 764

STREET ADDRESS

CITY-ST-ZIP

NAME

STREET ADDRESS

SIGNATURE:\_

CITY-ST-ZIP