2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000008453

City-St-Zip:

SARASOTA, FL 34232

Entity Name: SUNCOAST X-PLOSION, INC.

FILED May 16, 2003 Secretary of State

_iicicy ita		110.			
Current Principal Place of Business:			New Principal Place of Business:		
	OOSA DRIVE FA, FL 34232				
Current Mailing Address:			New Mailing Address:		
	OOSA DRIVE FA, FL 34232				
FEI Number: FEI Number Applied For (ed For() Fl	El Number Not Applicable (X)	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
SARASOT	DOSA DRIVE FA, FL 34232 e named entity submits this stater e of Florida.	nent for the purpo	ose of changing its registere	ed office or registered agent, or both,	
0,0,1,,,,	Electronic Signature of Re	gistered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () Delete GELSI, STEVE 2911 NODOSA DRIVE SARASOTA, FL 34232		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete HULL, SANDY 5546 WILDE OAK WAY SARASOTA, FL 34232		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D () Delete CARR, LISA 410 135TH STREET F		Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: LISA CARR D 05/16/2003