2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000034416

Entity Name: PEREZ CONSULTING SERVICES, INC.

Apr 25, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1551 ARDENWOOD LANE DELTONA, FL 32738 **Current Mailing Address: New Mailing Address:** 1551 ARDENWOOD LANE DELTONA, FL 32738 FEI Number: 59-3712815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEREZ, ALBA I 1551 ARDENWOOD LANE DELTONA, FL 32738 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change (X) Addition PEREZ, TANYA D Name: Name: 874 BROADWAY - APT 707 Address: Address: City-St-Zip: City-St-Zip: NEW YORK, NY 10003 Title: Title: () Change (X) Addition () Delete VERRONE, TRACY L Name: Name: 9481 METCALF - APT 303 Address Address: MANASSAS, VA 20110 City-St-Zip: City-St-Zip: () Change (X) Addition Title: () Delete Title: PEREZ, NICOLE Name: Name: 1551 ARDENWOOD LANE Address Address: City-St-Zip: City-St-Zip: DELTONA, FL 32738 Title: () Delete Title: () Change (X) Addition PEREZ, JOSE A Name: Name: Address: Address: 1551 ARDENWOOD LANE City-St-Zip: City-St-Zip: DELTONA, FL 32738 Title: Title: () Change (X) Addition () Delete Name: Name: PEREZ, NICOLE Address: 1551 ARDENWOOD LANE Address: City-St-Zip: City-St-Zip: DELTONA, FL 32738 Title: () Delete Title: () Change (X) Addition Name: Name: PEREZ, ALBA I 1551 ARDENWOOD LANE Address: Address: City-St-Zip: City-St-Zip: DELTONA, FL 32738

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE A. PEREZ P 04/25/2002