

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000022286

FILED
Mar 06, 2003
Secretary of State

Entity Name: DRYMENSION, INC.

Current Principal Place of Business:

3554 LAKE WORTH RD
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

3554 LAKE WORTH RD
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-0561141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROUTHIER, NATHALIE S
7385 ST ANDREW RD
LAKE WORTH, FL 33467

Name and Address of New Registered Agent:

ROUTHIER, NATHALIE S
7385 ST ANDREWS RD
LAKE WORTH, FL 33467

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: NATHALIE S. ROUTHIER

03/06/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: ROUTHIER, RICHARD R
Address: 7385 SAINT ANDREWS ROAD
City-St-Zip: LAKE WORTH, FL 33467

Title: DS () Delete
Name: ROUTHIER, NATHALIE S
Address: 7385 ST ANDREW RD
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: NATHALIE S. ROUTHIER

DS

03/06/2003

Electronic Signature of Signing Officer or Director

Date