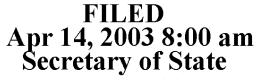
## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)** P97000002891 DOCUMENT # 1. Entity Name AMERICAN BALLROOM COMPANY, INC.



04-14-2003 90789 032 \*\*\*150.00

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					A COO W							
Principal Place of Business 1077 PONCE DE LEON BLVD CORAL GABLES FL 33134			Mailing Address 1077 PONCE DE LEON BLVD CORAL GABLES FL 33134				[]		# 1 <b>11</b> 11 <b>11</b> 111 <b>11</b>			
2. Principal Place of Business 3			3. Mailing Address				. "					
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City & State				4. FEI Number 06-8710414 Applied For Net Applied For					pplied For
Zip Country			Zip Country				5. Certificate of Status Desired See Required					
6. Name and Address of Current Registered Agent							7 Name	and Addres	ee of New E	Registered A		
	o. Hame and Ad	diesa of outlent he	giatorea Agent		Name		7. IVAING	and Addies		registered A	gent	<del></del>
KIMMINS, JOHN					Street Address (P.O. Box Number is Not Acceptable)							
1077 PONCE DE LEON BLVD. CORAL GABLES FL 33134							•			J_v		
·										FL	Zip Coo	ie
	named entity submit- tions of registered age		e purpose of changing its	registere	d office or	registere	d agent, o	r both, in the	State of Fig	orida. I am fa	amiliar with,	and accept
ŞIGNATURE .	Signature, typed or printed n	ame of registered agent and t	itte if applicable. (NOTE	: Registered	Agent signatu	ure required w	when reinstating	g)	<u> </u>	DATE		
Afte	ILE NOW!!! FEE r May 1, 2003 Fee t k Payable to Florida	will be \$550.00	ate				9.	Election C Trust Fund	ampaign Fir Contributio			00 May Be d to Fees
10.		OFFICERS AND DIF	RECTORS	11.			ADDITIO	NS/CHANG	SES TO OFF	FICERS AND	DIRECTOR	S IN 11
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	_		Delete	TITLE		_	MO T	A BYE			(E) Change	☐ Addition
NAME	CHIANG, JANE					ſ	NG, J					}
STREET ADDRESS			STRE		T ADDRESS	49 SANTA CRUZ				ľ		
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NAME	LEE, JOSIE			NAME								
STREET ADDRESS	1 '				T ADDRESS							ļ
CITY-ST-ZIP	LOS ANGELES CA				ST-ZIP	ľ						ł
		1 30013		<del></del>								7.1157
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NAME	TRILLIEGI, BRUNC			NAME								
STREET ADDRESS	11 YACHT CLUB				T ADDRESS							
CITY-ST-ZIP	FORT WALTON B	EACH FL 32548	4	CITY-	ST-ZIP							
TITLE	VPD		☐ Delete	TITLE							Change	☐ Addition
NAME	ENG, WAYNE			NAME								
STREET ADDRESS	8933 W SAHARA	AVE		STREE	T ADDRESS							
CITY-ST-ZIP	LAS VEGAS NV 8			CITY-	ST-ZIP							
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NAME .	CHIANG, MARTIN		- Delete	NAME	1		NC M	Αρφτνι			Onlinge	
STREET ADDRESS	20 COUNTRY LAN	IC			T ADDRESS		NG, M					
CITY-ST-ZIP	ROLLINGS HILLS	-			ST-ZIP	-	ANTA				7.	}
		LOT UK 302/4		_			ING H	TTT2E2.	LATE, (	CA. 902		
TITLE	VPD		☐ Delete	TITLE	,	VPD					X Change	☐ Addition
NAME	THEISS, GEORGE			NAME		THEI	SS, G	EORGE I	3			
STREET ADDRESS 15410 SW 77 AVE.				T ADDRESS		600 BILTMORE WAY APT#PH110 CORAL GABLES, FL. 33134						
CITY-ST-ZIP	MIAMI FL 33157	***		CITY-	ST-ZIP	CÓŘA	L GAB	LES, FI	<u>33</u> 13 <u>.                                    </u>	34		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: