

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


P97000099231

03 AUG 14 PM 3:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P97000099231**

1. Entity Name  
**THE EUCLID GROUP, INC.**



Principal Place of Business  
**46 SW 1ST STREET 3RD FLOOR  
MIAMI FL 33130**

Mailing Address  
**46 SW 1ST STREET 3RD FLOOR  
MIAMI FL 33130**

**55053831**



04-04-03 90085 039 \$300.00  
 CHECK HERE IF MAKING CHANGES \$150.00

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Zip Country

4. FEI Number **65-0795416** Applied For (Not Applicable)

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**BASS, JEFFREY S  
46 SW 1ST STREET 3RD FLOOR  
MIAMI FL 33130**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

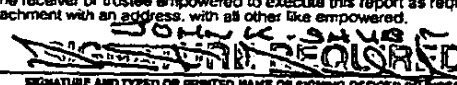
**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2003 Fee will be \$550.00  
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BASS, JEFFREY S</b> <b>46 SW 1ST STREET 3RD FLOOR</b> <b>MIAMI FL 33130</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SHUBIN, JOHN K</b> <b>46 SW 1ST STREET 3RD FLOOR</b> <b>MIAMI FL 33130</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**  **3/19/03 304.321.6000**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

Attachment

55053831  
#P97000099231

SHUBIN & BASS, P.A.  
46 S.W. 1ST ST., 3RD FL.  
MIAMI, FL 33130  
(305) 381-8080

SUNTRUST  
SUNTRUST BANK, MIAMI, N.A.  
PRIVATE BANKING CENTER OFFICE 285  
MIAMI, FLORIDA 33131  
63-80-660

██████████ 6031

DATE                      CHECK                      AMOUNT  
03/11/03                      6031                      \*\*\*\*\$300.00.

PAY                                      \*\*\* THREE HUNDRED & 00/100 DOLLARS

TO THE ORDER OF: DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
ANNUAL REPORTS SECTION  
P.O. BOX 1500  
TALLAHASSEE FL 32302-1500

Acct: P93000001647

*[Handwritten signature]*

Aug. 5, 2003

I am sending these reports with copy of check (original and cashed) for the second time. I hope this resolves this problem. If any questions please call.

Thank you

Both accounts on same check. The check is at Dept. of State verified.