

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000018780

FILED
Apr 16, 2002 8:00 AM
Secretary of State

Entity Name: BEAST ROW, INC.

Current Principal Place of Business:

3430 E LAKE ROAD
PALM HARBOR, FL 34685

New Principal Place of Business:

3430 E LAKE ROAD
SUITE 1
PALM HARBOR, FL 34685

Current Mailing Address:

3430 E LAKE ROAD
PALM HARBOR, FL 34685

New Mailing Address:

3430 E LAKE ROAD
SUITE 1
PALM HARBOR, FL 34685

FEI Number: 59-3564400

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHEAR, ROBERT L
2790 SUNSET POINT RD
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: PIECHOWICZ, TERESA
Address: 1004 HOOK DRIVE
City-St-Zip: SPRING HILL, FL 34608

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HILL, RICHARD D
Address: PO BOX 1829
City-St-Zip: OLDSMAR, FL 34677

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: RICHARD D. HILL

P

04/16/2002

_____ Electronic Signature of Signing Officer or Director

_____ Date