

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S83991

Entity Name: MEA GROUP, INC.

FILED
Mar 28, 2003
Secretary of State

Current Principal Place of Business:

5971 CATTLERIDGE BLVD
SUITE 100
SARASOTA, FL 34232 US

Current Mailing Address:

5971 CATTLERIDGE BLVD
SUITE 100
SARASOTA, FL 34232 US

New Principal Place of Business:

5969 CATTLERIDGE BLVD
SUITE 200
SARASOTA, FL 34232 US

New Mailing Address:

FEI Number: 65-0287818

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROLANDO DOCTORA
5971 CATTLERIDGE BLVD
SUITE 100
SARASOTA, FL 34232 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RUBINO, GEORGE
Address: 5971 CATTLERIDGE BLVD, STE 100
City-St-Zip: SARASOTA, FL 34232

Title: CD () Delete
Name: DOCTORA, ROLANDO
Address: 5971 CATTLERIDGE BLVD, STE 100
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: BRADY, GLORIA
Address: 5971 CATTLERIDGE BLVD, STE 100
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: BRADY, SCOTT
Address: 5971 CATTLERIDGE BLVD, STE 100
City-St-Zip: SARASOTA, FL 34232

Title: VD () Delete
Name: WATERS, LISA
Address: 5971 CATTLERIDGE BLVD, STE 100
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ROLANDO DOCTORA

CD

03/28/2003

Electronic Signature of Signing Officer or Director

Date