2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000067934

Entity Name: A.L.T., INC.

FILED Jan 24, 2002 8:00 AM Secretary of State

11257 U.S. HWY. ONE 11257 U.S. HIGHWAY ONE N. PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408

Current Mailing Address: New Mailing Address:

11257 U.S. HWY. ONE 11257 U.S. HIGHWAY ONE N. PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408

FEI Number: 65-1035674 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

CASHMAN, JUDY CASHMAN, JUDY 11257 U.S. HWY. ONE 11257 U.S. HIGHWAY ONE N. PALM BEACH, FL 33408 US NORTH PALM BEACH, FL 33408 US

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: JUDY CASHMAN 01/24/2002

> Electronic Signature of Registered Agent Date

> > Title:

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition GADOMSKI, TOMASZ GADOMSKI, TOMASZ Name: Name: 5688 HOLLY LANE 8774 SE WATER OAK PL Address: Address:

JUPITER, FL 33458 City-St-Zip: City-St-Zip: TEQUESTA, FL 33459

(X) Change () Addition () Delete LUCZKOWIEC, ARTHUR Name: LUCZKOWIEC, ARTHUR Name: 5688 HOLLY LANE 120 DAY LILY DR Address: Address: JUPITER, FL 33458 JUPITER, FL 33458 City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change (X) Addition

LUCZKOWIEC, JAROSLAW Name: Name: 34 CHENANGO DR Address Address: City-St-Zip: City-St-Zip: POWELL, OH 43065

Title: () Delete Title: () Change (X) Addition

CASHMAN, JUDY Name: Name:

Address: Address: 16417 SW TWO WOOD WAY City-St-Zip: City-St-Zip: INDIANTOWN, FL 34956

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.

Ρ SIGNATURE: TOMASZ GADOMSKI 01/24/2002