

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90701 050 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 418570 1. Entity Name SYDSTEAD CORP..			
Principal Place of Business 400 LESLIE DR. #1105 STE 215 HALLANDALE, FL 33009 US		Mailing Address 400 LESLIE DR. #1105 STE 215 HALLANDALE, FL 33009 US	
1815 Griffin Road 301 Dania Beach, FL 33433 USA		1815 Griffin Road 301 Dania Beach, FL 33433 USA	
11037051			
☐ CHECK HERE IF MAKING CHANGES			
4. FEI Number 59-1507762		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WOLOFSKY, HOWARD 400 LESLIE DR. #1105 HALLANDALE, FL 33009		Name Howard Wolofsky Street 1815 Griffin Road, Suite 301 Dania Beach, FL 33433 City FL Zip Code 33433	
8. The above named entity submits this statement for the purpose of changing its registered office and the obligations of registered agent.			
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when submitting)			
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 PD NAME WOLOFSKY, HOWARD STREET ADDRESS 400 LESLIE DR., STE 216 CITY-ST-ZIP HALLANDALE, FL 33009	☐ Delete	TITLE Change NAME 1815 Griffin Road, Suite 301 STREET ADDRESS Dania Beach, FL 33433 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE VD NAME LEVINE, MARLENE STREET ADDRESS 400 LESLIE DR., STE 216 CITY-ST-ZIP HALLANDALE, FL 33009	☐ Delete	TITLE Change NAME 1815 Griffin Road, Suite 301 STREET ADDRESS Dania Beach, FL 33433 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE SD NAME BURSTEIN, RHONDA STREET ADDRESS 400 LESLIE DR., STE 216 CITY-ST-ZIP HALLANDALE, FL 33009	☐ Delete	TITLE Change NAME 1815 Griffin Road, Suite 301 STREET ADDRESS Dania Beach, FL 33433 CITY-ST-ZIP	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 shareholders empowered.			
SIGNATURE:		Date 4/28/03 954 925 2990	

CR2034 (10/02)