## 2002 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT# 432128**

Entity Name: PIFER, INC.

FILED Jan 07, 2002 Secretary of State

		110.					
Current Principal Place of Business:				New Principal Place of Business:			
	HRIDGE RD. NBEACH, FL	334365026 US		7700 HIGH RIDGE RD. BOYNTON BEACH, FL 334265026 US			
Current M	ailing Addre	ess:	New IV	New Mailing Address:			
7700 HIGH RIDGE RD. BOYNTON BEACH, FL 334365026 US			7700 HIGH RIDGE RD. BOYNTON BEACH, FL 334265026 US				
FEI Number:	: 59-1494061	FEI Number Applied For()	FEI Number Not	Applicable ( )	Certificate of Status Desire	ed (X)	
Name and	Address of	Current Registered Agent:	Name	and Address o	of New Registered Agent:		
54 N E 4TH DELRAY B The above	BEACH, FL 3:		e purpose of chang	ing its registere	d office or registered agent,	or both,	
SIGNATUF							
	Electro	nic Signature of Registered A	gent		Date		
Election Can		to satisfy its Intangible Tax filing r ng Trust Fund Contribution(). CTORS:	•	. ,	ES TO OFFICERS AND DI	RECTO	
Title: Name: Address: City-St-Zip:	KILPATRICK, 1750 LAKE D	) Delete HAROLD D SR R. CH, FL 33444	Title: Name: Address City-St-2		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	KILPATRICK, 1725 LAKE D		Title: Name: Address City-St-2		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	KILPATRICK, 1750 LAKE D		Title: Name: Address City-St-2		( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	TAS ( MORRIS, JOH 8541 N. LAKE PLANTATION,	DASHA DR.	Title: Name: Address City-St-2		(X) Change ( ) Addition DHN R EHALL DRIVE, APT 202 BERDALE, FL 33324		
Title: Name: Address: City-St-Zip:	KILPATRICK, 425 N W 18TH		Title: Name: Address City-St-2		() Change () Addition		
Title: Name: Address: City-St-Zip:	KILLPATRICK 302 N W 16TH	) Delete , HAROLD D JR. H ST. CH, FL 33444	Title: Name: Address City-St-2		() Change () Addition		

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: JOHN R. MORRIS TAS 01/07/2002