2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000001626

Entity Name: LEGAL ZOOM NEVADA, INC.

FILED Mar 26, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

395 ALHAMBRA CIRCLE 111 N.E. FIRST STREET SUITE 301 SUITE 901

CORAL GABLES, FL 33134 US MIAMI, FL 33132 US

Current Mailing Address: New Mailing Address:

589 N LARCHMOND AVE 7083 HOLLYWOOD BLVD. 2ND FLOOR SUITE 180

LOS ANGELES, CA 90004 US LOS ANGELES, CA 90028 US

FEI Number: 95-2073977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FEDERICO MACIA, P.A.

395 ALHAMBRA CIRCLE, SUITE 310

CORAL GABLES, FL 33134 US

HARRISON, DOUGLAS
111 N.E. FIRST STREET
SUITE 901

MIAMI, FL 33132 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: DOUGLAS HARRISON 03/26/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: HARTMAN, EDWARD Name: LIU, BRIAN

Address: 639 NORTH LARCHMONT AVE., SUITE 107 Address: 7083 HOLLYWOOD BLVD., SUITE 180

City-St-Zip: LOS ANGELES, CA 90004 City-St-Zip: LOS ANGELES, CA 90028

Title: CD () Delete Title: TV (X) Change () Addition Name: HARTMAN, EDWARD Name: LEE, BRIAN

Address: 639 NORTH LARCHMONT AVE., SUITE 107 Address: 7083 HOLLYWOOD BLVD., SUITE 180

City-St-Zip: LOS ANGELES, CA 90004 City-St-Zip: LOS ANGELES, CA 90028

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

Name: LIU, BRIAN Name:

Address: 639 NORTH LARCHMONT AVE., SUITE 107 Address:
City-St-Zip: LOS ANGELES, CA 90004 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: BRIAN LIU P 03/26/2003