

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003535

FILED  
Apr 15, 2003  
Secretary of State

Entity Name: EARTH NET, INC.

**Current Principal Place of Business:**

865 NE 149TH STREET  
NORTH MIAMI, FL 33161

**New Principal Place of Business:**

**Current Mailing Address:**

865 NE 149TH STREET  
NORTH MIAMI, FL 33161

**New Mailing Address:**

FEI Number: 93-1189717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BASTOS, BEN  
865 NE 149TH STREET  
NORTH MIAMI, FL 33161

**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

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: TRIPURARI, SWAMI  
Address: 22001 PANAORAMA  
City-St-Zip: PHILO, CA 95466

Title: D ( ) Delete  
Name: BROWN, CHRIS  
Address: 22001 PANAORAMA  
City-St-Zip: PHILO, CA 95466

Title: D ( ) Delete  
Name: SIMPSON, DAVID  
Address: 22001 PANAORAMA  
City-St-Zip: PHILO, CA 95466

**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:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SWAMIV TRIPURARI

CD

04/15/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date