

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000003537

Entity Name: PROJECT EARTH, INC.

FILED
Apr 15, 2003
Secretary of State

Current Principal Place of Business:

865 NE 149TH ST
NORTH MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

865 NE 149TH ST
NORTH MIAMI, FL 33161

New Mailing Address:

FEI Number: 93-1189718

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BASTOS, BEN
865 NE 149TH ST
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 PANORAMA
City-St-Zip: PHILO, CA 95466

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

Title: D () Delete
Name: SIMPSON, DAVID
Address: 22001 PANORAMA
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: SWAMI TRIPURARI

CD

04/15/2003

Electronic Signature of Signing Officer or Director

Date