2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

Principal Place of Business

F02000003684

Mailing Address

1. Entity Name LOVELACE SCIENTIFIC RESOURCES, INC.



**FILED** Feb 03, 2003 8:00 am Secretary of State

02-03-2003 90042 031 \*\*\*150.00

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7400 NORTH KE MIAMI FL 33156	ENDALL DR., STE, 404	. STE. 404 7400 NORTH KENDALL DR., STE. 404 MIAMI FL 33156				
2. Principal Pla	ace of Business	3. Mailing Address		. (106)/100 ((() 100)/100 (() 10		
Suite, Apt. #	Suite, Apt. #, etc.  Suite, Apt. #, etc.		CHECK HERE IF MAKIN			
City & State City & State			4. FEI Number 85-0357767	Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered	Agent	
		Name	Name			
CORPORA	CORPORATE CREATIONS NETWORK INC.		Street Ad	Street Address (P.O. Box Number is Not Acceptable)		
941 FOUR	TH ST.					
MIAMI BEA	ACH FL 33139					
			City	F	L Zip Code	
		( ) in a line of	ristand office or	registered agent, or both, in the State of Florida. I an	n familiar with, and accept	
8. The above	named entity submits this statement f ons of registered agent.	or the purpose of changing its req	gistered office or	egiacolda agoin, or bown, with a		
(no oungem	J					
SIGNATURE -	Signature, typed or printed name of registered ager	at and title it applicable. (NOTE: Re	egistered Agent signatu	re required when reinstating) DATE		
Fi	LENOWIII: FEE1S \$150.00 v May 1, 2003 (Fee Will be: 550.00 (Payable to Fortca Department)			9. Election Campaign Financing Trust Fund Contribution.	Added to Fees	
10.	OFFICERS ANI		11.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 11	
TITLE	BCHAIRMAN	☐ Delete	TITLE	VP T	Change Addition	
NAME	Rubin, Robert		NAME	BURLESON, TESS 2425 RIDGE COUST PRIVE S	: t -	
STREET ADDRESS	2425 RIDGECREST DR. SE		STREET ADDRESS CITY-ST-ZIP	ALBUQUENQUE, NUN MUXIC	0 87105	
CITY-ST-ZIP	ALBUQUERQUE NM 87108		TITLE	n -	Change Addition	
TITLE	D SOONOMON DETERME	☐ Delete	TITLE . NAME	CROWELL, RICK PRIVE 2425 RIDSECTOR PRIVE	5.6.	
NAME	ECONOMON, PETER MD 5400 GIBSON BLVD. SE	The second secon	STREET ADDRESS	2425 KIDERCARES TORTE	** 63/4C	
STREET ADDRESS CITY-ST-ZIP	ALBUQUERQUE NM 80718		CITY-ST-ZIP	ALBUQUENQUE, NEW MONI	60 81108	
TITLE	D	☐ Delete	TITLE	0	Change 🔀 Addition	
NAME	TWIEST, MELVIN MD		NAME	BLAUGRAND, LEE' DRIV 2425 RIDGERASS DRIV	1456	
STREET ADDRESS	975 EAST 3RD ST.		DITM OT 710	Language and the level in	MICO O IT VO	
CITY-ST-ZIP	CHATTANOOGA TN 37403		U111-31-2IF	ALBUQUENQUE, NEW MO LOVELAGE - TOHNSON, TACK 2425 RINGSCHOST PRIVE ALBUQUENQUE, NOW MU	Change	
TITLE	P	☐ Delete	, TITLE . NAME	LOYELACK - JOHNSON, ) ACK		
NAME	MARX, PAT		STREET ADDRESS	2425 Ringsenoss Pinive	1	
STREET ADDRESS CITY-ST-ZIP	2425 RIDGECREST DR SE ALBUQUERQUE NM 87108		CITY-ST-ZIP	ALBUQUEAQUE, Non Mo.		
	8 ASST SECRETARY	□ Delete	TITLE	-	Change Addition	
NAME	COALSON, JUDY		NAME		<u> </u>	
STREET &DDRESS	2425 RIDGECREST DR SE		STREET ADDRESS			
CITY-ST-ZIP	ALBUQUERQUE NM 87108		CITY-ST-ZIP		☐ Change ☐ Addition	
TITLE	Ť	☐ Delete	TITLE		□ cualite □ vocation	
NAME	WILLIAMS, CONNIE		NAME STREET ADDRESS		r	
STREET ADDRESS	2425 RIDGECREST DR SE		CITY-ST-ZIP			
CITY-ST-ZIP	ALBUQUERQUE NM 87108		0117 01 2113		portify that the information	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 like empowered.

SIGNATURE: