## 2002 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # F62448  1. Entity Name DANCE STUDIOS, INC.						Feb 21, 2002 8:0 Secretary of St					te	
DANCE S	10008,	IIVÇ.						02-21-2002	90093 002	, 150.	00	
Principal Place of Business  Mailing Address  MARY L BANTA  1425 MIDDLE RIVER DRIVE  FT LAUDERDALE FL 33304  Mailing Address  Mailing Address  MIDDLE RIVER DRIVE  1425 MIDDLE RIVER DRIVE  FT LAUDERDALE FL 33304											811 81811 1888	
Principal Place of Business     3. Mailing Address											0)( 0)(0)( 1 <b>06</b> )	
Suite, Apt. #, etc. Suite, Apt. #, etc.							_	DO NOT WRITE IN THIS SPACE				
City & Sta	City & State City & State						4.	FEI Number <b>59-2164368</b>			plied For t Applicable	
Zip		Country	у	Zip	ry	5.	Certificate of Status Desired		8.75 Add	itional		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent						
RANTA MARY I						Name						
1425 MIDDLE RIVER DRIVE						Street Addres	ss (P.O. E	Box Number is Not Acceptable	) ~			
FT LAUDERDALE FL 33304												
						City			FL	Zip Code	) 	
8. The above	e named entity	submits	this statement for th	he purpose of changing its	s registere	d office or regi	stered ag	gent, or both, in the State of Flo	rida.			
SIGNATURE												
	Signature, typed o	r printed nar	ne of registered agent and			Agent signature req	uired when r	einstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!!  After May 1, 2002  Make Check Payable						vill be \$550.0		10. Election Campaign Fina Trust Fund Contribution			May Be to Fees	
11.	T	(	OFFICERS AND DII	RECTORS	12.	<del></del>	AC	DITIONS/CHANGES TO OFF				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD   BANTA, MA   1425 MIDDI   FT. LAUDEI	LE RIVE		☐ Delete		l l				Change	Addition	
TITLE NAME STREET ADDRESS	VD CROSBY, M 3616 NE 23	3 AVENU	JE	☐ Delete		T ADDRESS				☐ Change	Addition Addition	
CITY-ST-ZIP	ft. L'audei SD	RDALE I		Delete	CITY-	ST-ZIP				Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	BANTA, BR 1409 MIDDI FT. LAUDEI	LE RIVE	r dr.	Detecte	NAME Stree	í			!	Ostalige		
TITLE NAME STREET ADDRESS				☐ Delete	TITLE NAME STREE					Change	Addition	
CITY-ST-ZIP	<u> </u>					ST-ZIP					- Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		ı			1	Change	☐ Addition(	
TITLE NAME				Delete	TITLE					Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP					STREE	T ADDRESS ST-ZIP						
indicated of the cor	on this report poration or the	or supple receiver	emental report is tru or trustee empowe	ue and accurate and that r	my signatu as require	ire shall have th	he same l	119.07(3)(i), Florida Statutes. I legal effect as if made under o da Statutes; and that my name	ath; that I am	i an officer o	or director	

SIGNATURE:

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR