

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F94000002520

FILED
Jan 03, 2002
Secretary of State

Entity Name: CVI LASER CORPORATION

Current Principal Place of Business:

PO BOX 11308
ALBUQUERQUE, NM 87192

New Principal Place of Business:

Current Mailing Address:

PO BOX 11308
ALBUQUERQUE, NM 87192

New Mailing Address:

FEI Number: 85-0220620

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMAN, GREG
7648 SOUTHLAND BLVD
SUITE 104
ORLANDO, FL 32809 US

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CP () Delete
Name: HAHN, YU H
Address: 2103 LAKE CRESCENT CT
City-St-Zip: WINDERMERE, FL 34786

Title: PD () Delete
Name: HIGDON, JAMES R
Address: PO BOX 22153
City-St-Zip: SANTA FE, NM

Title: TSV () Delete
Name: MEYER, DENISE
Address: 10417 CAMINO DEL OSO NE
City-St-Zip: ALBUQUERQUE, NM

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: HAHN, YU H
Address: 2103 LAKE CRESCENT CT
City-St-Zip: WINDERMERE, FL 34786 US

Title: PD (X) Change () Addition
Name: HIGDON, JAMES R
Address: PO BOX 22153
City-St-Zip: SANTA FE, NM 87502 US

Title: TSV (X) Change () Addition
Name: MEYER, DENISE
Address: 10417 CAMINO DEL OSO NE
City-St-Zip: ALBUQUERQUE, NM 87111 US

Title: D () Change (X) Addition
Name: HAHN, DAVID N
Address: 12605 TRILLIUM TRAIL NE
City-St-Zip: ALBUQUERQUE, NM 87111 US

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: DAVID N. HAHN

D

01/03/2002

Electronic Signature of Signing Officer or Director

_____ Date