

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F96000005857

FILED
Feb 19, 2002 8:00 AM
Secretary of State

Entity Name: SHOW LOGISTICS INTERNATIONAL, INC.

Current Principal Place of Business:

5150 109TH AVENUE
BAY 2
SUNRISE, FL 33351 US

Current Mailing Address:

5150 109TH AVENUE
BAY 2
SUNRISE, FL 33351 US

New Principal Place of Business:

5150 109TH AVENUE
BAY 1
SUNRISE, FL 33351 US

New Mailing Address:

5150 109TH AVENUE
BAY 1
SUNRISE, FL 33351 US

FEI Number: 11-3281451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EL-HILA, RAIDH
5150 109TH AVENUE
BAY 2
SUNRISE, FL 33351

Name and Address of New Registered Agent:

EL-HILA, RAIDH
5150 109TH AVENUE
BAY 1
SUNRISE, FL 33351

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:

02/19/2002

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: PD () Delete
Name: EL-HILA, RIADH
Address: 5150 109TH AVENUE BAY 2
City-St-Zip: SUNRISE, FL 33351

Title: S () Delete
Name: EL-HILA, KENIA
Address: 5150 109TH AVENUE BAY 2
City-St-Zip: SUNRISE, FL 33351

Title: T () Delete
Name: MIRANDA, BYRON
Address: 5150 109TH AVENUE BAY 2
City-St-Zip: SUNRISE, FL 33351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EL-HILA, RIADH
Address: 5150 109TH AVENUE BAY 1
City-St-Zip: SUNRISE, FL 33351

Title: S (X) Change () Addition
Name: EL-HILA, KENIA
Address: 5150 109TH AVENUE BAY 1
City-St-Zip: SUNRISE, FL 33351

Title: T (X) Change () Addition
Name: MIRANDA, BYRON
Address: 5150 109TH AVENUE BAY 1
City-St-Zip: SUNRISE, FL 33351

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: BYRON MIRANDA

T

02/19/2002

Electronic Signature of Signing Officer or Director

Date