2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# J14992

Entity Name: MICHAEL LEVINE, P.A.

Apr 29, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

633 N.E. 167TH ST. #501 1133 S. UNIVERSITY DRIVE N. MIAMI BEACH, FL 33162

211

PLANTATION, FL 33324

Current Mailing Address: New Mailing Address:

633 N.E. 167TH ST. #501 1133 S. UNIVERSITY DRIVE N. MIAMI BEACH, FL 33162

PLANTATION, FL 33324

FEI Number: 59-2710875 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LEVINE, MICHAEL LEVINE, MICHAEL 1133 S UNIVERSITY DRIVE 633 NE 167TH ST STE #501 STE #211 NORTH MIAMI BEACH, FL 33162 US PLANTATION, FL 33324 US

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: 04/29/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

(X) Change () Addition () Delete Title:

LEVINE, MICHAEL, LEVINE, MICHAEL, Name: Name:

633 NE 167 ST #501 Address: 1133 S. UNIVERSITY DRIVE #211 Address: City-St-Zip: NORTH MIAMI BCH, FL City-St-Zip: PLANTATION, FL 33324 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 Statutés. 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: MICHAEL LEVINE 04/29/2003 D