## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

DOCU 1. Entity Nam	MENT # J19492 MOTIONAL CONSULTANTS		ORT (UBR)	FILEI Apr 03, 2001 Secretary 0 04-03-2001 90034 016	8:00 am f State
Principal Place of Business 10301 S.W. 107 STREET MIAMI FL 33176  2. Principal Place of Business		Mailing Address 10301 S.W. 107 STREET MIAMI FL 33176			
		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS	SPACE
City & State		City & State		4. FEI Number 59-2708526	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
	6. Name and Address of Curre	nt Registered Agent	Name	7. Name and Address of New Registered	<u></u>
1030	RS,-JEANNE 11 S.W. 107 STREET 11 FL 33176	معهومة المستجريتين أأقرارات	Street Address City	(P.O. Box Number is Not Acceptable)	Zip Code
	named entity submits this statement	for the purpose of changing it	ts registered office or registe	ered agent, or both, in the State of Florida.	<u></u>
9. This corporate flags filing r	named entity submits this statement Signature, typed or printed name of registered age pration is eligible to satisfy its Intangit requirement and elects to do so, ria on back)	onle FILE NOW	OTE: Registered Agent signature requir	ed when reinstating)  DATE  10. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
9. This corpo Tax filing r (See criter	Signature, typed or printed name of registered age or printed name of registered age or printed name of registered age or printed name of registered age.	onle FILE NOW	OTE: Registered Agent signature requir	ed when reinstating)  DATE  10. Election Campaign Financing Trust Fund Contribution	Added to Fees
9. This corpo Tax filing r (See criter	Signature, typed or printed name of registered age or action is eligible to satisfy its Intangit requirement and elects to do so, it is on back)  OFFICERS AN DP  MYERS, JEANNE 10301 S.W. 107 STREET	onl and title if applicable. (NC  Ole FILE NOW  After MAY 1, 2  Make Check Pays	OTE: Registered Agent signature requir VIII FEE S \$150.00 2001 Fee will be \$550.00 able to Department of St	ate  DATE  DATE  DATE  DATE  DATE	Added to Fees
9. This corportax filing in (See criter) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered ago pration is eligible to satisfy its Intangit requirement and elects to do so, ria on back)  OFFICERS AN DP  MYERS, JEANNE	ont and title if applicable. (NO  DIE FILE NOW  After MAY 1, 2  Make Check Paya  D DIRECTORS	OTE: Registered Agent signature requir V!!! FEE IS \$150.00 2001 Fee will be \$550.00 able to Department of St 12. TITLE NAME STREET ADDRESS	ate  DATE  DATE  DATE  DATE  DATE	Added to Fees D DIRECTORS IN 11
9. This corportax filing in (See criter) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age or action is eligible to satisfy its Intangit requirement and elects to do so, it is on back)  OFFICERS AN DP  MYERS, JEANNE 10301 S.W. 107 STREET	one one of the if applicable.  FILE NOW After MAY 1, 2 Make Check Pays  D DIRECTORS  Delste	VIII FEE IS \$150.00 2001 Fee will be \$550.00 able to Department of St  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	ate  DATE  DATE  DATE  DATE  DATE	Added to Fees  D DIRECTORS IN 11  Change Addition
9. This corportax filing respectively.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE CITY-ST-ZIP	Signature, typed or printed name of registered age or action is eligible to satisfy its Intangit requirement and elects to do so, it is on back)  OFFICERS AN DP  MYERS, JEANNE 10301 S.W. 107 STREET	ont and title if applicable. (NC  PILE NOW  After MAY 1, 2  Make Check Pays  D DIRECTORS  Delete	DTE: Registered Agent signature requir V!!! FEE S \$150.00 2001 Fee will be \$550.00 able to Department of St  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	ate  DATE  DATE  DATE  DATE  DATE	Added to Fees  D DIRECTORS IN 11 Change Addition Change Addition
9. This corpor Tax filing r (See criter  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age or action is eligible to satisfy its Intangit requirement and elects to do so, it is on back)  OFFICERS AN DP  MYERS, JEANNE 10301 S.W. 107 STREET	cent and title if applicable. (NC DIE FILE NOW After MAY 1, 2 Make Check Pays D DIRECTORS Delete Delete	OTE: Registered Agent signature requir  V!!! FEE IS \$150.00  2001 Fee will be \$550.00  able to Department of St  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	ate  DATE  DATE  DATE  DATE  DATE	Added to Fees  D DIRECTORS IN 11 Change Addition  Change Addition  Change Addition