

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K33537

FILED
Apr 27, 2003
Secretary of State

Entity Name: LENMAR CONSULTANTS, INC.

Current Principal Place of Business:

4045 SHERIDAN AVE.
SUITE 425
MIAMI BEACH, FL 33140 US

Current Mailing Address:

4045 SHERIDAN AVE.
SUITE 425
MIAMI BEACH, FL 33140 US

FEI Number: 65-0082915

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

6423 COLLINS AVE
APT 305
MIAMI BEACH, FL 33141 US

New Mailing Address:

6423 COLLINS AVE
APT 305
MIAMI BEACH, FL 33141 US

Name and Address of Current Registered Agent:

MARTIN, WILLIAM S
4439 PRAIRIE AVE
STE. 214
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

MARTIN, WILLIAM S
6423 COLLINS AVE
APT 305
MIAMI BEACH, FL 33141 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: WILLIAM S MARTIN

04/27/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTIN, WILLIAM S
Address: 4439 PRAIRIE AVE.
City-St-Zip: MIAMI BCH., FL

Title: SD () Delete
Name: MARTIN, WILLIAM S.
Address: 4439 PRAIRIE AVE.
City-St-Zip: MIAMI BEACH, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARTIN, WILLIAM S
Address: 6423 COLLINS AVE
City-St-Zip: MIAMI BCH., FL 33141

Title: SD (X) Change () Addition
Name: MARTIN, WILLIAM S.
Address: 6423 COLLINS AVE
City-St-Zip: MIAMI BEACH, FL 33141

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: WILLIAM S MARTIN

PD

04/27/2003

Electronic Signature of Signing Officer or Director

Date