## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000028197

City-St-Zip:

Entity Name: MOBILE CLASSROOM AND TRAINING SOLUTIONS, LLC

FILED Jan 27, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
2540 GULFBR PALM HARBO	EEZE CIRC	LE		New Fillic	ipai riace	or Busiliess.		
Current Maili	ng Address	:		New Maili	ng Address	<b>5:</b>		
2540 GULFBR PALM HARBO								
FEI Number: 11-3	3660637	FEI Number Appl	ied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired ( )		
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
BRELSFORD, 2540 GULFBR PALM HARBO	EEZE CIRC							
The above nar		ıbmits this state	ment for the p	urpose of changing i	ts registered	d office or registered agent, or bo	th,	
SIGNATURE:								
	Electronic	Signature of R	egistered Age	nt		Date		
MANAGING MEMBERS/MEMBERS:			ADDITION	ADDITIONS/CHANGES:				
Title: Name: Address: City-St-Zip:	( ) [	Delete		Title: Name: Address: City-St-Zip:	BRELSFOR 2540 GULFE	( ) Change (X) Addition D, GARY L BREEZE CIRCLE IOR, FL 34683		
Title: Name: Address:	( ) [	Delete		Title: Name: Address:	BRELSFOR	()Change(X)Addition D, SUSAN E BREEZE CIRCLE		

City-St-Zip: PALM HARBOR, FL 34683

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GARY L. BRELSFORD 01/27/2003