2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003
Secretary of State

DOCUMENT# L97000000531

Entity Name: SIGNATURE CONSULTANTS, L.L.C.

Current Principal Place of Business:

2200 W. COMMERCIAL BLVD., SUITE 207
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

2200 W. COMMERCIAL BLVD.
SUITE 207
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2200 W. COMMERCIAL BLVD., SUITE 207
FORT LAUDERDALE, FL 33309

New Mailing Address:

2200 W. COMMERCIAL BLVD.
SUITE 207
FORT LAUDERDALE, FL 33309

FEI Number: 65-0753698 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

COHEN, JAY
2200 W. COMMERCIAL BLVD., SUITE 207
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

COHEN, JAY
2200 W. COMMERCIAL BLVD.
SUITE 207
FORT LAUDERDALE, FL 33309 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: _____ 01/22/2003
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: COHEN, JAY L
Address: 2200 W COMMERCIAL BLVD SUITE 207
City-St-Zip: FT LAUDERDALE, FL 33309

Title: MGR ( ) Delete
Name: DROOKER, STEVEN
Address: 303 GREENWOOD ST
City-St-Zip: NEWTON, MA 02159

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JAY L COHEN MGR 01/22/2003
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date