

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000002138

FILED
May 02, 2003
Secretary of State

Entity Name: ALLIED PROFESSIONS & TECHNOLOGIES, L.L.C.

Current Principal Place of Business:

390 N. ORANGE AVE.
SUITE 2180
ORLANDO, FL 32801 US

New Principal Place of Business:

Current Mailing Address:

390 N. ORANGE AVE.
SUITE 2180
ORLANDO, FL 32801 US

New Mailing Address:

FEI Number: 59-3605824

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID, JOHN J
390 N. ORANGE AVE.
SUITE 2180
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: ROBINSON, RICHARD T MGR
Address: 89 HIPPODROOMLAAN
City-St-Zip: STERREBEEK, BELGIUM, BE 1933 BE

Title: MGR () Delete
Name: VAN DER EERDEN, CHRISTIAN MGR
Address: 55 RINGLAAN
City-St-Zip: TERVUREN, BELGIUM, BE 3080 BE

Title: MGRM () Delete
Name: JOSEPH DU BUSQUIEL, FRANÇOISE MGRM
Address: 89 HIPPODROOMLAAN
City-St-Zip: STERREBEEK, BELGIUM, BE 1933 BE

Title: MGRM () Delete
Name: MONETTE, VÉRONIQUE MGRM
Address: 55 RINGLAAN
City-St-Zip: TERVUREN, BELGIUM, BE 3080 BE

ADDITIONS/CHANGES:

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

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

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: RICHARD T. ROBINSON

MGR

05/02/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date