

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M02000003363

FILED
Apr 28, 2003
Secretary of State

Entity Name: CASEY ANDERSON GROUP, L.L.C.

Current Principal Place of Business:

5722 S. FLAMINGO ROAD #188
FT. LAUDERDALE, FL 33330

New Principal Place of Business:

Current Mailing Address:

5722 S. FLAMINGO ROAD #188
FT. LAUDERDALE, FL 33330

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAW OFFICES OF SUZANNE ST. LUCE PA
160 NW 176 ST, SUITE 300
MIAMI, FL 33169 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: TRADEWINDS HEALTH SP, A, INC.
Address: PICARD, PORTSMOUTH
City-St-Zip: COMMONWEALTH OF DOMINICA,

Title: MGR () Delete
Name: ST. LUCE, PHILIP
Address: 5722 S. FLAMINGO ROAD #188
City-St-Zip: FT. LAUDERDALE, FL 33330

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: PHILIP ST. LUCE

MGR

04/28/2003

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