

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M47891

FILED  
Feb 03, 2003  
Secretary of State

Entity Name: KELLER ALVAREZ ASSOCIATES, INC.

## Current Principal Place of Business:

185 FOX TRACE  
ATHENS, GA 30606 US

## New Principal Place of Business:

845 SPRING STREET NW  
UNIT 506  
ATLANTA, GA 30308 US

## Current Mailing Address:

185 FOX TRACE  
ATHENS, GA 30606 US

## New Mailing Address:

845 SPRING STREET NW  
UNIT 506  
ATLANTA, GA 30308 US

FEI Number: 59-2799230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ALVAREZ, SILVIA  
650 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VPS ( ) Delete  
Name: ALVAREZ, LEONARDO  
Address: 185 FOX TRACE  
City-St-Zip: ATHENS, GA 30606 US

Title: SP ( ) Delete  
Name: ALVAREZ, LISA  
Address: 185 FOX TRACE  
City-St-Zip: ATHENS, GA 30606 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPS (X) Change ( ) Addition  
Name: ALVAREZ, LEONARDO  
Address: 845 SPRING STREET NW #506  
City-St-Zip: ATLANTA, GA 30308 US

Title: SP (X) Change ( ) Addition  
Name: ALVAREZ, LISA  
Address: 845 SPRING STREET NW #506  
City-St-Zip: ATLANTA, GA 30308 US

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: LISA ALVAREZ

P

02/03/2003

Electronic Signature of Signing Officer or Director

Date