2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2003
Secretary of State

DOCUMENT# N01000006643

Entity Name: THE "10TH LIFE" SANCTUARY, INC.

Current Principal Place of Business:

22238 SW 62ND AVENUE
BOCA RATON, FL 33428

New Principal Place of Business:

Current Mailing Address:

22238 SW 62ND AVENUE
BOCA RATON, FL 33428

New Mailing Address:

FEI Number: 65-1141306 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SWEE, MAURICE M
22238 SW 62ND AVENUE
BOCA RATON, FL 33428

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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SWEE, MAURICE
Address: 22238 SW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33428

Title: VPS ( ) Delete
Name: SWEE, SANDRA
Address: 22238 SW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33428

Title: TD ( ) Delete
Name: SWEE, SANDRA
Address: 22238 SW 62ND AVENUE
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: SUPERIOR, LINDA
Address: 6511 NW 94TH ST.
City-St-Zip: TAMARAC, FL 33321

Title: D ( ) Delete
Name: OLAH, THERESA W
Address: 3301 D RALEIGH STREET
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete
Name: HOOPER, WILLIAM
Address: 2022 NW 112 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAURICE SWEE PD 05/22/2003

Electronic Signature of Signing Officer or Director — Date