2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000009659

Entity Name: FLORIDA EGYPTIAN SOCIETY, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
625 COURT STREET CLEARWATER, FL 33756			625 COURT STREET SUITE 200 CLEARWATER, FL 33756		
Current Mailing Address:			New Mailing Address:		
625 COURT STREET CLEARWATER, FL 33756			625 COURT STREET SUITE 200 CLEARWATER, FL 33756		
FEI Number: 11-3668	989 FEI Number App	olied For() FEI Nui	mber Not Appli	cable () Certificate o	of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:		
MARQUARDT, EMIL C JR 625 COURT STREET CLEARWATER, FL 33756			MARQUARDT, EMIL C JR 625 COURT STREET SUITE 200 CLEARWATER, FL 33756		
The above named in the State of Flor		ement for the purpose o	of changing it	s registered office or regi	stered agent, or both,
SIGNATURE: EN	IIL C. MARQUARDT, JI	R.		04/3	0/2003
E	lectronic Signature of F	Registered Agent		Da	te
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	VPT () Change (X) A SOLIMAN, FAWZI 7533 TOMEL DRIVE SPRING HILL, FL 34607	Addition
Title: Name: Address: City-St-Zip:	()Delete		Title: Name: Address: City-St-Zip:	S () Change (X) A HEDEIA, MEDHAT 1800 GULF BOULEVARD BELLEAIR SHORE, FL 3378	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	P () Change (X) A OSMAN, MAGDY 1800 GULF BOULEVARD BELLEAIR SHORE, FL 3378	
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	D () Change (X) A OSMAN, MAGDY 1800 GULF BOULEVARD BELLEAIR SHORE, FL 3378	
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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: MEDHAT HEDEIA S 04/30/2003