

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N17197

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: FORT LAUDERDALE BALLET CLASSIQUE, INC.

Current Principal Place of Business:

% MAGDA AUNON
508 NORTHEAST 43TD STREET
OAKLAND PARK, FL 33334

New Principal Place of Business:

Current Mailing Address:

% MAGDA AUNON
508 NORTHEAST 43TD STREET
OAKLAND PARK, FL 33334

New Mailing Address:

FEI Number: 59-2784027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AUNON, MAGDA
508 NORTHEAST 43TD STREET
OAKLAND PARK, FL 33334 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: AUNON, MAGDA
Address: 508 N.E. 43RD STREET
City-St-Zip: OAKLAND PARK, FL

Title: TD () Delete
Name: GROSS, LAURIE
Address: 508 N.E. 43RD STREET
City-St-Zip: OAKLAND PARK, FL 33334

Title: SD () Delete
Name: BURKS, VALERIE
Address: 508 NE 43RD ST.
City-St-Zip: OAKLAND PARK, FL 33334

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:

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: VALERIE BURKS

SD

04/29/2002

Electronic Signature of Signing Officer or Director

Date