2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N21626

Entity Name: THE DBA PROGRAM, INC.

FILED Mar 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
300 NW 12 #309 MIAMI, FL	2 AVE		·		
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
300 NW 12 AVE			-		
#309					
MIAMI, FL	33128 US				
FEI Number:	59-2839966	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
% HOLLAN 701 BRICK	TON, LYNN C ND & KNIGHT I (ELL AVENUE, 33131 US	LLP	MARTORANO, SAL 300 N W 12 AVE MIAMI, FL 33128 US	3	
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: SAL MARTORANO				03/01/2002	
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DC () CLEMENTS, CH 300 NW 12TH A MIAMI, FL 3312	VE.	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DP () DOMINGUEZ, A 300 NW 12TH A MIAMI, FL 3312	VE.	Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address: City-St-Zip:	DVP () MARTORANO, \$ 300 NW 12 TH A MIAMI, FL 3312	AVE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	DVP () RALEY, CLAIRE 300 NW 12TH A MIAMI, FL 3312	WE	Title: (Name: Address: City-St-Zip:) Change ()Addition	

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: SAL MARTORANO DVP 03/01/2002