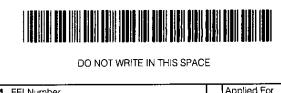
2002 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N34072** 1. Entity Name LOVE IS FOR ETERNITY, INC. Mailing Address Principal Place of Business 901 LENNOX ROAD WEST 901 LENNOX ROAD WEST PALM HARBOR FL 34683 PALM HARBOR FL 34683 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State

SIGNATURE

FILED May 21, 2002 8:00 am Secretary of State

05-21-2002 91129 049 ****61.25



4 EEL Number

City & State	;	City a state		59-4	2982612		t Applicable	
Zip	Country	Zip	Country	5. Certificate of Statu		8.75 Add ee Required	.75 Additional Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
			Name					
HOONE, G	AYLE H.		Street Addre	ess (P.O. Box Number is No	t Acceptable)			
	X RD WEST							
	BOR FL 34683				<u></u>			
			City		FL	Zip Code)	
8. The above	named entity submits this statement for	the purpose of changing its	registered office or reg	istered agent, or both, in th	e state of Florida.			
<u>}</u>								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register			: Registered Agent signature re	ed Agent signature required when reinstating) DATE				
1				· · · · · · · · · · · · · · · · · · ·				
ي د چيند	. يونيا	9. Flection Cam	npaign Financing*	\$5.00 May Be	Make Check	Pavable	to	
F	FILE NOW: FEE IS \$61.25	Trust Fund C		Added to Fees	Department			
					•			
10.	OFFICERS AND DIRI	ECTORS	11.	ADDITIONS/CHANGES	TO OFFICERS AND DIRE			
71766	VPD	☐ Delete	TITLE			☐ Change	☐ Addition	
	HAMMOND, PETE		NAME STREET ADDRESS					
	2412 VAN WISE AVENUE MADISON WI 53705		CITY-ST-ZIP					
	PD	□ Oelete	TITLE			☐ Change	Addition	
	HOONE, GAYLE	□ Oeiete	NAME		'			
	901 LENNOX RD. W.		STREET ADDRESS					
CITY-ST-ZIP	PALM HARBOR FL		CITY-ST-ZIP					
	TD	☐ Delete	TITLE			Change	Addition	
	BOYLE, DALE	The same of the sa	NAME		the second second	والمحاصي	-	
	3505 TARPON WOODS BLVD.		STREET ADDRESS CITY-ST-ZIP					
	PALM HARBOR FL			··-···		☐ Change	☐ Addition	
HILL	HAMMOND, SHIRLEY	☐ Delete	TITLE NAME	•			L Addition	
	2412 VAN WISE AVENUE		STREET ADDRESS		•		•	
	MADISON WI 53705		CITY-ST-ZIP					
TITLE	VPD	☐ Delete	TITLE			Change	Addition	
	BOYLE, DEBBIE		NAME					
λ.	3505 TARPON WOODS BLVD		STREET ADDRESS					
CITY-ST-ZIP	PALM HARBOR FL 34685		CITY-ST-ZIP		. .			
TITLE		☐ Delete	TITLE NAME			Change	Addition	
NAME STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
12. I hereby c	ertify that the information supplied with	this filing does not qualify for	the exemption stated	in Section 119.07(3)(i), Flori	da Statutes. I further certif	y that the ir	nformation	
indicated of the cor	on this report or supplemental report is	true and accurate and that σ	nv signature shall have	the same legal effect as if r	nade under oath: that I an	n an officer	or director	
changed	or on an attachment with an address, w	ith all other like empowered.		,	,			