2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N97000001026**

1. Entity Name



05-07-2003 90156 043 ****61.25

FILED

May 07, 2003 8:00 am § Secretary of State

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Principal Place of Business 1103 W. HIBISCUS., STE 305 MELBOURNE FL 32901 US		Mailing Address 1103 W. HIBISCUS STE 305 MELBOURNE FL 32901 US				sās hau dālia hi	818 8 44 (48)	
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite. Apt. #, etc. City & State		CHECK HERE IF MAKING CHANGES				
City & State				4. FEI Number 59-3434820		─	Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Statu	s Desired	\$8.75 Add		
	6. Name and Address of Current	Registered Agent		7. Name and Addres	s of New Registered	Agent]
00.102-11	ALIO DETECT		Name				,	1
GIUSTINIANO, BETTY L 2207 GREENWAY DRIVE		Street Address		s (P.O. Box Number is Not Acceptable)				
WELBOU	RNE FL 32901		City		FL	Zip Cod	e	1
• The should	e named entity submits this statement fo	the number of changing its	registered office as serie	to and or and or had in the			and against	ļ
the obligat	tions of registered agent.	or the purpose of changing its	registered office or regis	stered agent, or both, in the	State of Florida. Tami	iamiliar with,	and accept	
	9,55				- \$4,00			Ì
SIGNATURE	Signature, typed of printed name of registered agent	ing or eve	-		470-			
	Signature, typed or printed name of registered agent	and the II applicable. (NOTE	: Registered Agent signature requ	ored when reinstating)	DATE]
FILE NOW: FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution.						
	FILE NOW: FEE IS \$61.25			\$5.00 May Be Added to Fees				İ
10.	FILE NOW: FEE IS \$61.25	Trust Fund C			Florida Depar	tment of S	State	<u> </u>
10.	OFFICERS AND DIF	Trust Fund C	ontribution.	Added to Fees	Florida Depar	tment of S	State	(02)
10: TITLE NAME	OFFICERS AND DIF	Trust Fund Co	11. TITLE NAME	Added to Fees	Florida Depar	tment of S	State	(10/02)
10. TITLE NAME STREET ADDRESS	OFFICERS AND DIF D COE, MICHAEL 3615 MISTY OAK DRIVE APT 405	Trust Fund Co	11. TITLE NAME STREET ADDRESS	Added to Fees	Florida Depar	tment of S	State	037 (10/02)
TITLE	OFFICERS AND DIF D COE, MICHAEL 3615 MISTY OAK DRIVE APT 405 MELBOURNE FL 32901	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Depar	RECTORS IN	State	32E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF D COE, MICHAEL 3615 MISTY OAK DRIVE APT 405 MELBOURNE FL 32901 SD	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Added to Fees	Florida Depar	tment of S	State	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIF D COE, MICHAEL 3615 MISTY OAK DRIVE APT 405 MELBOURNE FL 32901	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees	Florida Depar	RECTORS IN	State	CR2E037 (10/02)
TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND DIF D COE, MICHAEL 3615 MISTY OAK DRIVE APT 405 MELBOURNE FL 32901 SD GIUSTINIANO, BETTY 2207 GREENWAY DRIVE MELBOURNE FL 32901	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Added to Fees	Florida Depar	RECTORS IN	State	CR2E037 (10/02)
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: