# 2003 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jan 31, 2003**
**Secretary of State**

DOCUMENT# N97000006807

**Entity Name:** OTHERS INTERNATIONAL, INCORPORATED

**Current Principal Place of Business:**

4150 N.E. 1ST TERRACE
POMPANO BEACH, FL 33064

**New Principal Place of Business:**

**Current Mailing Address:**

4150 N.E. 1ST TERRACE
POMPANO BEACH, FL 33064

**New Mailing Address:**

**FEI Number: 52-1960744** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WIGGINS, SHIRLEY
4150 N.E. 1ST TERRACE
POMPANO BEACH, FL 33064

**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: | CEOP | ( ) Delete |
| Name: | WIGGINS, SHIRLEY | |
| Address: | 4150 N.E. 1 TERRACE | |
| City-St-Zip: | POMPANO BEACH, FL 33064 | |
| Title: | MD | ( ) Delete |
| Name: | TIMMONS, SHIRLEY | |
| Address: | 433 S.W. 1ST COURT, #302 | |
| City-St-Zip: | POMPANO BEACH, FL 33060 | |
| Title: | TSD | ( ) Delete |
| Name: | YOUNG, VIVIAN | |
| Address: | 545 NW 21ST COURT | |
| City-St-Zip: | POMPANO BCH, FL 33060 | |
| Title: | MD | ( ) Delete |
| Name: | HAYNES, CLAUDETTE | |
| Address: | 7714 JEWELWEED COURT | |
| City-St-Zip: | SPRINGFIELD, VA 22152 | |

**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: | |
| 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: SHIRLEY WIGGINS D 01/31/2003

Electronic Signature of Signing Officer or Director — Date