## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N99000005999

Entity Name: LIFT UP YOUR EYES, INC.

FILED Apr 08, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:	
9497 VALERIE STREET JACKSONVILLE, FL 32208					
Current Mailing Address:			New Maili	New Mailing Address:	
9497 VALERIE STREET JACKSONVILLE, FL 32208					
FEI Number: 94-1687665 FEI Number Applied For ( ) FEI Nu		FEI Number Not Appl	mber Not Applicable ( ) Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
ADKISON, DERYLE 8964 OLD PLANK ROAD JACKSONVILLE, FL 32220 US					
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:		ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () E CLOUTIER, GILB 5110 E. JANICE ( JACKSONVILLE,	CIRCLE	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D ()E LUCAS, SCOTT 4335 DAZET COU JACKSONVILLE,		Title: Name: Address: City-St-Zip:	D (X) Change ( ) Addition FAISON, JOHN 1576 POCOMOKE ROAD FRANKLINTON, NC 27525	
Title: Name: Address: City-St-Zip:	D () C CLEMENTS, EDV 179 LIONS GATE ST. AUGUSTINE,	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E RAMIREZ, ABDI 8174 DEVOE STI JACKSONVILLE,		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D () E RAMIREZ, MARIS 8174 DEVOE STI JACKSONVILLE,	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E STARK, ROGER 4232 GARIBALDI JACKSONVILLE,	AVENUE	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: GILBERT CLOUTIER D 04/08/2002

JOHN FAISON FOUNDER 1576 POCOMOKE ROAD FRANKLINTON, NC 27525