2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000005441

FILED
Mar 11, 2002 8:00 AM
Secretary of State

Entity Name: EINSTONE, INC.

Current Principal Place of Business:

4649 PONCE DE LEON BLVD. #303
MIAMI, FL 33146

New Principal Place of Business:

4649 PONCE DE LEON BLVD.
#400
MIAMI, FL 33146

Current Mailing Address:

4649 PONCE DE LEON BLVD. #303
MIAMI, FL 33146

New Mailing Address:

4649 PONCE DE LEON BLVD.
#400
MIAMI, FL 33146

FEI Number: 65-0637353 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIRKIN, MARK H ESQ.
C/O MIRKIN & WOOLF, P.A.
1700 PALM BEACH LAKES BLVD. #580
WEST PALM BEACH, FL 33401 US

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SEAGREN, DAG
Address: 90 EDGEWATER DRIVE #818
City-St-Zip: CORAL GABLES, FL 33133

Title: D ( ) Delete
Name: SEAGREN, LARS
Address: 90 EDGEWATER DRIVE #818
City-St-Zip: CORAL GABLES, FL 33133

Title: D ( ) Delete
Name: LARSEN, CHARLES E
Address: 3890 STEVE REYNOLDS BLVD.
City-St-Zip: NORCROSS, FL 30093

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAG E SEAGREN D 03/11/2002

Electronic Signature of Signing Officer or Director Date