## 2002 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the recei changed, or on an attachme

SIGNATURE

## Jan 31, 2002 8:00 am Secretary of State P00000009571 DOCUMENT # 1. Entity Name 01-31-2002 90090 026 \*\*\*150.00 SITEBUILD.COM, INC. Principal Place of Business Mailing Address 1072-B NEWPORT CENTER DR. E. 1072-B NEWPORT CENTER DR. E. DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 65-0980300 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent FRIEDMAN, MARC Street Address (P.O. Box Number is Not Acceptable) 6166 NW 41ST DRIVE CORAL SPRINGS FL 33067 Zip Code City 8. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition TITLE TITLE ☐ Delete NAME STANNARD, LISA V NAME 6166 NW 41ST DRIVE STREET ADDRESS STREET ADDRESS **CORAL SPRINGS FL 33067** CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE NAME STANNARD, JAMES E NAME STREET ADDRESS STREET ADDRESS 6166 NW 41ST DRIVE CITY-ST-ZIP CORAL SPRINGS FL 33067 CITY-ST-ZIP ☐ Addition Delete Change TITLE STD TITLE-NAME VARADY, JOYCE NAME STREET ADDRESS STREET ADDRESS 6166 NW 41ST DRIVE CITY-ST-ZIP CITY-ST-ZIP eoral springs fl 33067 Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Defete Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

**FILED** 

CR2E034 (9/01)