

FILED
Jun 09, 2003 8:00 am
Secretary of State

06-09-2003 90112 048 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

90139096

DOCUMENT # P00000040723			
1. Entity Name MEETING PRACTICES, INC.			
Principal Place of Business 8083 BOCA RIO DR. BOCA RATON, FL 33433		Mailing Address 8083 BOCA RIO DR. BOCA RATON, FL 33433	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-1020356		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
GINNS, STEVEN 370 W. CAMINO GARDENS BLVD., STE. 300 BOCA RATON, FL 33432			
7. Name and Address of New Registered Agent			
Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature is required when renewing.)</small>			
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
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 507, 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: <u>MARTIN MURPHY</u> 6.5.03 (561) 213.0239			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			

MARTIN MURPHY

Attachment to # ⁹⁰¹³⁹⁰⁹⁶~~PO0000040723~~

8083 Boca Rio Drive
Boca Raton, FL 33433

June 5, 2003

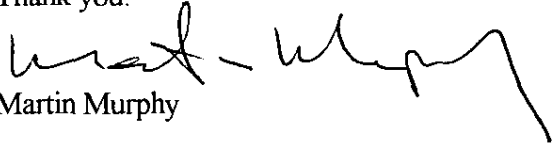
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Dear Sir/Madam:

Enclosed is the annual corporation fee of \$150.00 for Meeting Practices, Inc. Please excuse the lateness of this filing. However, I have still not received the form in the mail (The attached form was downloaded from your website). Please confirm my mailing address for your records: 8083 Boca Rio Drive, Boca Raton, FL 33433. This is also my home address.

I can be reached via my cell phone at 561.213.0239.

Thank you.


Martin Murphy