

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91203 046 ***150.00

11-4-01 AV

DOCUMENT # P00000054196

1. Entity Name
YOUTH UNDERGROUND, INC.



Principal Place of Business
450 SOUTH ORANGE AVENUE
SUITE 250
ORLANDO FL 32801

Mailing Address
450 SOUTH ORANGE AVENUE
SUITE 250
ORLANDO FL 32801



2. Principal Place of Business
1900 Summit Tower Blvd
Suite, Apt. #, etc.
260

3. Mailing Address
1900 Summit Tower Blvd
Suite, Apt. #, etc.
260

City & State
Orlando, FL

City & State
Orlando, FL

4. FEI Number 59-3684063

Applied For
Not Applicable

Zip
32810

Country

Zip
32810

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BAKER, ROBERT
450 SOUTH ORANGE AVENUE
SUITE 250
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name Robert Baker
Street Address (P.O. Box Number is Not Acceptable)
1900 Summit Tower Blvd.
Suite 260
City Orlando FL Zip Code 32810

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 Robert E. Baker

1/31/2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	OFFERDAHL, JOHN	
STREET ADDRESS	3016 BIRKDALE STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33332	
TITLE	D	<input type="checkbox"/> Delete
NAME	OFFERDAHL, LYNN	
STREET ADDRESS	3016 BIRKDALE STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL 33332	
TITLE	D	<input type="checkbox"/> Delete
NAME	BAKER, ROBERT	
STREET ADDRESS	978 GLENMEADOW DRIVE	
CITY-ST-ZIP	WINTER GARDEN FL 34787-2219	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Offerdahl, John	
STREET ADDRESS	2749 N.E. 37th Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	offerdahl, Lynn	
STREET ADDRESS	2749 N.E. 37th Dr.	
CITY-ST-ZIP	Ft. Lauderdale, FL-33308	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 607, 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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/03
Date

954.423.8101
Daytime Phone #

CR2E034 (10/02)