## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000068442

Entity Name: AMALGAMATED RESOURCES HOLDINGS INC.

FILED Apr 10, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

292 SO. CO. RD., STE. 109 PALM BEACH, FL 33480

Current Mailing Address: New Mailing Address:

292 SO. CO. RD., STE. 109

PALM BEACH, FL 33480

292 SOUTH COUNTY ROAD
SUITE 109
PALM BEACH, FL 33480

FEI Number: 65-1043620 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMPSDARUTH, AMAL MR.
292 SO. CO. RD., STE.109
PALM BEACH, FL 33480 US
SUITE 109
PALM BEACH, FL 33480 US
PALM BEACH, FL 33480 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: RAMPADARUTH AMAL 04/10/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO ( ) Delete Title: (X) Change ( ) Addition RAMPADARUTH, MAMAL RAMPADARUTH, AMAL Name: Name: 292 SO. CO. RD., STE. 109 292 SO. CO. RD., STE. 109 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

Title: PD () Delete Title: PD (X) Change () Addition Name: RAMPADARUTH, MAMAL Name: RAMPADARUTH, AMAL Address: 292 SO CO RD STE 109

 Address:
 292 SO. CO. RD., STE.109
 Address:
 292 SO. CO. RD., STE.109

 City-St-Zip:
 PALM BEACH, FL 33480
 City-St-Zip:
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Title: Title: CFOD ( ) Delete CEOD (X) Change ( ) Addition RAMPADWRUTH, JADOOMANEE Name: RAMPADARUTH, JADOOMANEE Name: 292 SO. CO. RD., STE. 109 292 SO CO RD STE 109 Address: Address: City-St-Zip: PALM BEACH, FL 33480 City-St-Zip: PALM BEACH, FL 33480

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: RAMPADARUTH AMAL PD 04/10/2003