2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000080951

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Name:

Address: City-St-Zip: BRYAN, MARK

LAUDERHILL, FL 33319

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3330 SPANISH MOSS TERRACE, APT. 412

Entity Name: ALPINE DISTRIBUTORS INTERNATIONAL, INC.

FILED Sep 08, 2002 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3330 SPANISH MOSS TERRACE APT. 412 LAUDERHILL, FL 33319 **Current Mailing Address: New Mailing Address:** 3330 SPANISH MOSS TERRACE APT. 412 LAUDERHILL, FL 33319 FEI Number: 65-1102354 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: MALCOLM, SHERYL 6011 RODMAN STREET SUITE 101 HOLLYWOOD, FL 33024 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: 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition BRYAN, NEVILLE Name: Name: 3330 SPANISH MOSS TERRACE, APT. 412 Address: Address: City-St-Zip: LAUDERHILL, FL 33319 City-St-Zip: Title: () Delete Title: () Change () Addition Name: SPAULDING, BEVERLY Name: 3330 SPANISH MOSS TERRACE, APT. 412 Address: Address: LAUDERHILL, FL 33319 City-St-Zip: City-St-Zip: Title: Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: BEVERLY SPAULDING MS 09/08/2002