

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000101749

Entity Name: L.A.D.P.I., INC.

FILED
Jan 17, 2002 8:00 AM
Secretary of State

Current Principal Place of Business:

3810 HOLLYWOOD BLVD
HOLLYWOOD, FL 33021

New Principal Place of Business:

Current Mailing Address:

P O BOX 29284
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 65-1050760

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEL VALLE, LUIS A
3810 HOLLYWOOD BLVD
HOLLYWOOD, FL 33023

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: DEL VALLE, LUIS A
Address: 1242 NW 192 LANE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VPD () Delete
Name: DEL VALLE, ELIZABETH
Address: 1242 NW 192 LANE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: LUIS A. DEL VALLE

PD

01/17/2002

Electronic Signature of Signing Officer or Director

Date