

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000002273

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: LFTT, INC.

Current Principal Place of Business:

2699 STIRLING ROAD
SUITE C405
FORT LAUDERDALE, FL 33312

New Principal Place of Business:

Current Mailing Address:

2699 STIRLING ROAD
SUITE C405
FORT LAUDERDALE, FL 33312

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TWERSKY, JONATHAN
2699 STIRLING ROAD
SUITE C405
FORT LAUDERDALE, FL 33312

Name and Address of New Registered Agent:

FLORIDA REGISTERED AGENTS, INC.
2699 STIRLING ROAD
A-201
FORT LAUDERDALE, FL 33312

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: KEVIN C. GLEASON

05/01/2002

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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Change (X) Addition
Name: TWERSKY, JONATHAN MR
Address: 19195 MYSTIC POINTE DR.
City-St-Zip: AVENTURA, FL 33180

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: JONATHAN TWERSKY

DP

05/01/2002

Electronic Signature of Signing Officer or Director

Date