

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000007819

1. Entity Name  
A CURRENT AFFAIR, INC.

Principal Place of Business  
701 NW 155 TERR  
PEMBROKE PINES FL 33028

Mailing Address  
701 NW 155 TERR  
PEMBROKE PINES FL 33028

2. Principal Place of Business  
3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

6. Name and Address of Current Registered Agent

NATTBOY, VIRGINIA H  
701 NW 155 TERR  
PEMBROKE PINES FL 33028

4. FEI Number  
65-1071168

Applied For

Not Applicable

5. Certificate of Status Desired  
 \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

PS  
NATTBOY, VIRGINIA H  
701 NW 155 TERR  
PEMBROKE PINES FL 33028

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TV  
KIRSHEN, SANDEI  
701 NW 155 TERR  
PEMBROKE PINES FL 33028

TITLE  Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  Change  Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-02

Date

(954) 430-2880

Daytime Phone #

CR2E034 (9/01)