

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000009325

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: LIAISON INTERNATIONAL, INC.

Current Principal Place of Business:

10667 NORTH EAST 11TH AVE
MIAMI SHORES, FL 33138

New Principal Place of Business:

Current Mailing Address:

10667 NORTH EAST 11TH AVE
MIAMI SHORES, FL 33138

New Mailing Address:

FEI Number: 65-1079501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ABRAHAM, NATHALIE
10667 NORTH EAST 11TH AVE
MIAMI SHORES, FL 33138

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: ABRAHAM, HERARD
Address: 10667 NE 11TH AVENUE
City-St-Zip: MIAMI SHORES, FL 33138

Title: VICE () Change (X) Addition
Name: ABRAHAM, MELISSE
Address: 10667 NE 11TH AVENUE
City-St-Zip: MIAMI SHORES, FL 33138

Title: TREA () Change (X) Addition
Name: ABRAHAM, NATHALIE
Address: 10667 NE 11TH AVENUE
City-St-Zip: MIAMI SHORES, FL 33138

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: NATHALIE ABRAHAM

Electronic Signature of Signing Officer or Director

TREA

04/29/2002

Date