

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2002 8:00 am
Secretary of State

04-21-2002 90914 046 ***150.00

DOCUMENT # P01000011614

1. Entity Name
SUDMER CORP.

Principal Place of Business 11921 SOUTH DIXIE HIGHWAY SUITE 205 PINECREST FL 33156	Mailing Address 11921 SOUTH DIXIE HIGHWAY SUITE 205 PINECREST FL 33156
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2. Principal Place of Business 11921 SOUTH DIXIE HWY Suite, Apt. #, etc. SUITE 205	3. Mailing Address SAME Suite, Apt. #, etc.
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City & State MIAMI FL.	City & State
Zip 33156	Country US

4. FEI Number 65-1089460	Applied For Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EDERY, MOSHE
 11921 SOUTH DIXIE HIGHWAY
 SUITE 205
 PINECREST FL 33156

7. Name and Address of New Registered Agent

Name OHAYON, SERGE
Street Address (P.O. Box Number is Not Acceptable)
 11921 SOUTH DIXIE HWY.
SUITE 205
City MIAMI **FL** **Zip Code** 33156

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  **DATE** 4/2/02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS

TITLE PD	NAME BRUNET, PHILIPPE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS C/O 11921 SOUTH DIXIE HIGHWAY		
CITY-ST-ZIP PINECREST FL 33156		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD	NAME OHAYON, SERGE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 11921 SOUTH DIXIE HWY., SUITE 205		
CITY-ST-ZIP MIAMI, FL. 33156		

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:  **DATE** 4/2/02 **Daytime Phone #**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CP2E034 (9/01)