## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P01000012579

City-St-Zip:

PENSACOLA, FL 32505

Entity Name: MICRO MASTERS USA, INC.

FILED Jul 16, 2003 Secretary of State

Littly Nai	ile. WIICKO	VIASTERS USA, INC.					
Current Principal Place of Business:				New Principal Place of Business:			
2101 W YOUGE PENSACOLA, FL 32505				2101 W. YONGE PENSACOLA, FL 32505			
Current Mailing Address:				New Mailing Address:			
2101 W YOUGE PENSACOLA, FL 32505				P.O. BOX 17061 PENSACOLA, FL 32522			
FEI Number:	59-3699545	FEI Number Applied For()	FEI Nur	nber Not Appl	licable ( )	Certificate of Status Desi	red ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
LEE, SIGURD E 2101 W YOUNGE ST PENSACOLA, FL 32504 US				LEE, SIGURD E 2101 W. YONGE ST. PENSACOLA, FL 32505 US			
	named entity of Florida.	submits this statement for th	ne purpose o	of changing i	ts registered	l office or registered agen	t, or both,
SIGNATURE:				07/16/2003			
Electronic Signature of Registered Agent						Date	
	npaign Financii S AND DIREC	ng Trust Fund Contribution(). CTORS:		ADDITION	IS/CHANGE	S TO OFFICERS AND D	IRECTORS:
Title: Name: Address: City-St-Zip:	DSVP (X NOVATKA, MA 3826 NAVY BI PENSACOLA,	_VD		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DP ( LEE, SIGURD 2101 W YOUN PENSACOLA,	IGE ST		Title: Name: Address: City-St-Zip:	DP LEE, SIGURI 2101 W. YO PENSACOLA	NGE ST	
Title: Name: Address:	DVPT (X JACOBS, ANT 4111 N DAVIS			Title: Name: Address:		() Change () Addition	

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.

City-St-Zip:

SIGNATURE: SIGURD EDWARD LEE DP 07/16/2003