2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000032771

Entity Name: TEESIDE PROPERTIES INC.

FILED Jul 12, 2002 8:00 AM Secretary of State

,		Tricor Entries, invo.				
Current Principal Place of Business:			New Prince	New Principal Place of Business:		
10235 W SAMOLE ROAD STE 201 CORAL SPRINGS, FL 33065				10235 W SAMPLE ROAD STE 201 CORAL SPRINGS, FL 33065		
Current M	lailing Addre	ss:	New Maili	New Mailing Address:		
10235 W SAMOLE ROAD STE 201 CORAL SPRINGS, FL 33065				10235 W SAMPLE ROAD STE 201 CORAL SPRINGS, FL 33065		
FEI Number	: 65-1158798	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and	Address o	f New Registered Agent:	
10235 W S	ER, LARRY SAMOLE ROA PRINGS, FL 3					
	e named entity e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATU	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
		o satisfy its Intangible Tax filing red g Trust Fund Contribution ().	quirement and elects to	do so (X).		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	CHANDLER, L	OLE ROAD STE 201	Title: Name: Address: City-St-Zip:	CHANDLER, 10235 W SA	(X) Change () Addition LARRY MPLE ROAD STE 201 IINGS, FL 33065	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	THILENIUS, 10235 W SA	() Change (X) Addition MARK MPLE RD, SUITE 201 IINGS, FL 33065	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	THILENIUS, 10235 W SA	() Change (X) Addition SANDRA MPLE RD #201 IINGS, FL 33065	
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	CHANDLER, 10235 W SA		

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: LARRY CHANDLER PD 07/12/2002