

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90177 004 ***150.00

0660871 SP

DOCUMENT # P01000036964

1. Entity Name

LIZWOERKS SALES US, INC.

Principal Place of Business

South
JB EXECUTIVE CENTER 314 MISSOURI AVE
STE 308B
CLEARWATER FL 33767

Mailing Address

South
JB EXECUTIVE CENTER 314 MISSOURI AVE
STE 308B
CLEARWATER FL 33767

→ rev a
Correct address

314 S. Missouri Ave Suite 308B



Clearwater FL 33767
 DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

JB Executive Center
314 S. Missouri Ave

3. Mailing Address

JB Executive Center
314 S. Missouri Ave

Suite, Apt. #, etc.

Suite 308B, Clearwater

Suite, Apt. #, etc.

Suite 308B, Clearwater

City & State

FL 33767 USA

City & State

FL 33767 USA

4. FEI Number

01-0629021

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SHAW, ELIZABETH

South
JB EXECUTIVE CENTER 314 MISSOURI AVE
STE 308B
CLEARWATER FL 33767

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 **PTD** ☐ Delete
 NAME **SHAW, ELIZABETH** *South*
 STREET ADDRESS **JB EXECUTIVE CENTER 314 MISSOURI AVE** *Suite 308B*
 CITY-ST-ZIP **CLEARWATER FL 33767**

TITLE **VSD** ☐ Delete
 NAME **PETERS, HUGH** *South*
 STREET ADDRESS **JB EXECUTIVE CENTER 314 MISSOURI AVE** *Suite 308B*
 CITY-ST-ZIP **CLEARWATER FL 33767**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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

2/27/02 (780) 452-1891
 Date Daytime Phone #

CR2E034 (9/01)

ATTACHMENT

DOC#: P01000036964

347197

Please note
check is

dated for

April 5/02

Deposit then

Thank

LJ3