2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000039868

Entity Name: OTHERLAND GROUP INC.

ARNAUT, MARYANN

22270 FESTIVAL WAY

BOCA RATON, FL 33428

Name:

Address:

City-St-Zip:

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: P.O. BOX 2111 POMPANO BEACH, FL 330612111 **Current Mailing Address: New Mailing Address:** P.O. BOX 2111 POMPANO BEACH, FL 330612111 FEI Number: 65-1103371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DAVIS, WILLIAM P III 2731 NE 14TH ST. CSWY #605 POMPANO BEACH, FL 33062 US 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ARNAUT, JOHN B Name: Name: 22270 FESTIVAL WAY Address: Address: City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: Title: Title: () Delete () Change () Addition Name: DAVIS. WILLIAM P III Name: 2731 NE 14TH ST. CSWY #605 Address: Address: POMPANO BEACH, FL 33062 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition DAVIS, CHRISTINE A Name: Name: 2731 NE 14TH ST. CSWY #605 Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 City-St-Zip: Title: () Delete Title: () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: WILLIAM P. DAVIS III V 04/29/2003