

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000046515

FILED
Jan 14, 2002 8:00 AM
Secretary of State

Entity Name: EA MANAGEMENT SERVICES INC.

Current Principal Place of Business:

3214 NW 84 AVE APT 129
SUNRISE, FL 33351

New Principal Place of Business:

1811 NW 51 STREET
HANGAR 42A
FT. LAUDERDALE, FL 33309

Current Mailing Address:

3214 NW 84 AVE APT 129
SUNRISE, FL 33351

New Mailing Address:

1811 NW 51 STREET
HANGAR 42A
FT. LAUDERDALE, FL 33309

FEI Number: 65-1104201

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LEGAL ZOOM NEVADA, INC.
395 ALHAMBRA CIRCLE SUITE 301
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MR. () Change (X) Addition
Name: PIETERS, DONALD PRESIDE
Address: 3214 NW 84 AVE APT. 129
City-St-Zip: SUNRISE, FL 33351 BR

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: DONALD PIETERS

MR

01/14/2002

Electronic Signature of Signing Officer or Director

Date