

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000048429

FILED  
Jan 16, 2002 8:00 AM  
Secretary of State

Entity Name: MEDGLUV INC.

## Current Principal Place of Business:

21346 ST ANDREWS BLVD  
SUITE 305  
BOCA RATON, FL 33433

## New Principal Place of Business:

4100 N. POWERLINE ROAD  
SUITE D5  
POMPANO BEACH, FL 33073

## Current Mailing Address:

21346 ST ANDREWS BLVD  
SUITE 305  
BOCA RATON, FL 33433

## New Mailing Address:

FEI Number: 65-1104158      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDREW, MEDVIN  
1601 N PALM AVE  
SUITE 303  
PEMBROKE PINES, FL 33026 US

## Name and Address of New Registered Agent:

ANDREW, MEDVIN  
6330 SW 41 CT  
DAVIE, FL 33314 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:

01/16/2002

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: P ( ) Delete  
Name: LEONG, JERRY  
Address: 21346 ST ANDREWS BLVD, SUITE 305  
City-St-Zip: BOCA RATON, FL 33433

Title: V ( ) Delete  
Name: ANNESLEY, JOHN  
Address: 21346 ST ANDREWS BLVD, SUITE 305  
City-St-Zip: BOCA RATON, FL 33433

Title: S ( ) Delete  
Name: WEBB, STEVE  
Address: 21346 ST ANDREWS BLVD, SUITE 305  
City-St-Zip: BOCA RATON, FL 33433

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: STEVE WEBB

S

01/16/2002

Electronic Signature of Signing Officer or Director

Date