

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000053545

FILED
Apr 06, 2002 8:00 AM
Secretary of State

Entity Name: SOUTH BEACH DIVAS INC.

Current Principal Place of Business:

701 COLLINS AVE #E-1
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

701 COLLINS AVE #E-1
MIAMI BEACH, FL 33139

New Mailing Address:

350 LINCOLN RD
SUITE 317
MIAMI BEACH, FL 33139

FEI Number: 65-1136149

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1000 WEST AVENUE SUITE 1114
MIAMI BEACH, FL 33139 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: D () Delete
Name: LASKEY, KATHERINE
Address: 701 COLLINS AVE #E-1
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: LASKEY, KATHERINE
Address: OCEAN DR # 208
City-St-Zip: MIAMI BEACH, FL 33139

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: KATHERINE E. LASKEY

PRES

04/06/2002

Electronic Signature of Signing Officer or Director

_____ Date