2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000057230

Entity Name: DEPARTMENT RECORDS, INC.

FILED Apr 16, 2003 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|---|--|---|---|--|
| 716 PARK PLACE W. PALM BCH, FL 33401 | | 809 N DIXIE HY W. PALM BCH, FL 33401 | | |
| Current Mailing Address: | | New Mailing Address: | | |
| P.O. BOX 2832 W. PALM BCH, FL 3340 | 02 | | | |
| FEI Number: 02-0576393 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| KNIGHT, DAVID 716 PARK PLACE W. PALM BCH, FL 3340 | 01 | | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | |
| | Electronic Signature of Registered Agent | | Date | |

Title: () Delete KNIGHT, DAVID Name: Address: 716 PARK PLACE

City-St-Zip: W. PALM BCH, FL 33401 Title: (X) Change () Addition KNIGHT, DAVID Name:

Address: 809 N DIXIE HY

City-St-Zip: W. PALM BCH, FL 33401

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: DAVID KNIGHT Ρ 04/16/2003