FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000065740

1. Entity Name

FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91292 038 ***150.00

Liva Corporation					
DO NOT WRI	TE IN THIS S 3. Mailing Address	PAGE		1102367	4
120 Charlotte Street Suite, Apt. #, etc.	Same Suite, Apt. #. etc.			DO NOT WRITE IN TH	- HIS SPACE
		·			
City & State St. Augustine, FL	City & State			4. FEI Number 59-3734202	Applied For Not Applicable
Zip Country 32084	Zip	Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
The part of the second		-	Name	7. Name and Address of Current Registr	ered Agent
DO NOT WRITE			Charles E. Hall, PhD Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE			77 Almeria Street		
			City St. Augustine FL Zip Code 32084		
8. 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. I am familiar with, and accertice obligations of registered agent.					am familiar with, and accept
SIGNATURE					23/03
Signature, typed or printed name of registere January 1 - May 1) Fee is \$150.0		E: Registered Ag	ent signature required t	when reinstating) DA	NE .
After May (1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State				Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
10. OFFICERS	AND DIRECTORS	NV 1.4	S. Consposition and Explanation Const.		我还在2000年12月1日日
NAME PD Cutter, Leon		TITLE NAME			
STREET ADDRESS St. Augustin		STREET A			
TITLE VD Cutter, Matt	hew J.	ITTLE			i de la companya de l
STREET ADDRESS St. Augustine, FL 32084		- NAME - STREET A	DDRESS	ng sayat ng mga mga ng nganggang at saya saya ng ng mga mga ng mg ng mga ng mg	
011 01 01		(CITY-ST	ZIP .		
MAME SD Cutter, Sonya D. NAME 120 Charlotte Street		, TITLE PNAME		100	
expert Append	ADDRESS St Augustine, FL 32084		DORESS HERSTALEN Zip	DO NOT WE	RITE SAFE
TD Cutter, Mark	: A.	TITLE		IN THIS SP	(10 Table 10
NAME 120 Charlotter Street		NAME Street a	nnarse		3 4 5
CITY-ST-ZIP St. Augustin	ne, FL 32084	CITY-ST-		roman arministra (b . 1 862). Held och sind i statistick statistick statistick statistick statistick statistick s Transport	
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STREET ADDRESS CITY-ST-ZIP		STREET AL	\$1255 PARTS TO SEE STATE OF THE SECOND S		

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: