

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000074738

FILED
May 01, 2002 8:00 AM
Secretary of State

Entity Name: A.C.S.W. INTERNATIONAL INC.

Current Principal Place of Business:

10121 NW 32ND ST
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

10121 NW 32ND ST
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 65-1127408

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRANT-DILLON, MARCIA H
10121 NW 32ND ST
SUNRISE, FL 33351 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:

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: N/A () Change (X) Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, N/ N/A

Title: N/A () Change (X) Addition
Name: N/A, N/A N
Address: N/A
City-St-Zip: N/A, N/ N/A

Title: N/A () Change (X) Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, N/ N/A

Title: PRES () Change (X) Addition
Name: GRANT-DILLON, MARCIA H
Address: 10121 NW 32 ST
City-St-Zip: SUNRISE, FL 33351

Title: DIR () Change (X) Addition
Name: DILLON, PAUL D N
Address: 10121 NW 32 ST
City-St-Zip: SUNRISE, FL 33351

Title: N/A () Change (X) Addition
Name: N/A, N/A
Address: N/A
City-St-Zip: N/A, N/ N/A

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: PAUL DEVON DILLON

DIRE

05/01/2002

Electronic Signature of Signing Officer or Director

Date