2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2002 8:00 AM
Secretary of State

DOCUMENT# P01000090924

Entity Name: WILSON TRAINING CORP.

Current Principal Place of Business:

19 N.W. 169TH STREET
NORTH MIAMI BEACH, FL 33169

New Principal Place of Business:

Current Mailing Address:

19 N.W. 169TH STREET
NORTH MIAMI BEACH, FL 33169

New Mailing Address:

FEI Number: 65-1158807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CUTLER, H. JEFFREY ESQ.
ALHAMBRA WEST, 95 MERRICK WAY, SUITE 440
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

WILSON, JOHN B
19 N.W. 169 STREET
NORTH MIAMI BEACH, FL 33169 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: JOHN B. WILSON 01/17/2002
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: PD ( ) Delete
Name: WILSON, JOHN B
Address: 19 N.W. 169TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33169

Title: TSD ( ) Delete
Name: WILSON, MARIA LORNA
Address: 19 N.W. 169TH STREET
City-St-Zip: NORTH MIAMI BEACH, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOHN B. WILSON PD 01/17/2002
Electronic Signature of Signing Officer or Director Date