

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000097355

FILED
Apr 05, 2003
Secretary of State

Entity Name: EXPERTIA, INC.

Current Principal Place of Business:

1415 ST. GABRIELLE LANE
3701
WESTON, FL 33326

Current Mailing Address:

1415 ST. GABRIELLE LANE
3701
WESTON, FL 33326

New Principal Place of Business:

1341 ST. TROPEZ CIRCLE
1107
WESTON, FL 33326

New Mailing Address:

1341 ST. TROPEZ CIRCLE
1107
WESTON, FL 33326

FEI Number: 65-1144373

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MORALES, LUIS A SR.
1415 ST. GABRIELLE LANE
3701
WESTON, FL 33326 US

Name and Address of New Registered Agent:

MORALES, LUIS A SR.
1341 ST. TROPEZ CIRCLE
1107
WESTON, FL 33326 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:

04/05/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORALES, LUIS A SR
Address: 1415 ST. GABRIELLE LANE, SUITE 3701
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORALES, LUIS A SR
Address: 1341 ST. TROPEZ CIRCLE APT 1107
City-St-Zip: WESTON, FL 33326

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: LUIS A. MORALES

PRES

04/05/2003

Electronic Signature of Signing Officer or Director

Date