

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000120324

FILED  
Jan 29, 2003  
Secretary of State

Entity Name: PROMOSCENTS, INC

## Current Principal Place of Business:

100 NORTH BISCAYNE BLVD  
SUITE 605  
MIAMI, FL 33132

## New Principal Place of Business:

100 NORTH BISCAYNE BLVD  
SUITE 2904  
MIAMI, FL 33132

## Current Mailing Address:

100 NORTH BISCAYNE BLVD  
SUITE 605  
MIAMI, FL 33132

## New Mailing Address:

100 NORTH BISCAYNE BLVD  
SUITE 2904  
MIAMI, FL 33132

FEI Number: 65-1158777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BENICHAY, BRIGITTE  
100 N BISCAYNE BLVD STE 2904  
MIAMI, FL 33132 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: HELFRICH, LAURENT  
Address: 100 N BISCAYNE BLVD STE 605  
City-St-Zip: MIAMI, FL 33132

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: HELFRICH, LAURENT  
Address: 100 N BISCAYNE BLVD STE 2904  
City-St-Zip: MIAMI, FL 33132

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: LAURENT HELFRICH

DP

01/29/2003

Electronic Signature of Signing Officer or Director

Date