Daytime Phone #

## 2002 Uniform Business Report (UBR)

SIGNATURE:

2002 Uniform Business Report (UBR)							FILED				
DOCUMENT # P01000121294 LIGHT CAPTURE INC.							Apr 02, 2002 8:00 am Secretary of State 04-02-2002 90893 033 ***150.00				
LIGHT C	ALIONE	iiVC.									
Principal Place of Business Mailing Address											
1006 W. 15T	-		1006 W. 15TH STREET								
RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404							1 (13)(100) (10 30)(0) (10)(100)(10)(10)	<b>18:8:</b> (18:8:2)	) 	(8)(( 8)(0) ( <b>6)</b> (	
Principal Place of Business     3. Mailing Address											
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & Star	te		City & State			4.	El Number 04-3593640			pplied For	
Zip	Country		Zip Count		try	5. (	Certificate of Status Desired		8.75 Add	ditional	
6. Name and Address of Current Registered Agent					Nome	7. 1	Name and Address of New Reg			·	
ANGELL CORPORATE SERVICES, INC.					Name Street Address (P.O. Box Number is Not Acceptable)						
C/O EDWARDS & ANGELL, LLP					Street A	udiess (i .O. 2			<del></del>		
ONE CLEMATIS STREET, SUITE 400 WEST PALM BEACH FL 33401					City		1.00		Zip Code	Δ	
					r r						
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.											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating). DATE											
9. This corpo	oration is eligi	ble to satisfy its Intangible	FILE NOW!!	! FEE	IS \$150.0	DO	40. 51-21-20-21-21-51-21				
Tax filing requirement and elects to do so. (See criteria on back)			After May 1, 2002 Fee will be \$5 Make Check Payable to Department				<ol> <li>Election Campaign Finand Trust Fund Contribution.</li> </ol>	cing	\$5.0 Added	May Be to Fees	
11.		OFFICERS AND DIF		12.			L DITIONS/CHANGES TO OFFICE	RS AND E	IRECTOR!	S IN 11	
TITLE NAME	Directo		☐ Delete	TITLE			,	[	Change	☐ Addition	
STREET ADDRESS	Ell15	Betensky us Brenton Stree	<u>.</u> +	NAMI STRE	ET ADDRESS						
CITY-ST-ZIP		KINS BOJ OT		Ш	-ST-ZIP						
TITLE	Direct		☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS	Brian Caldwell 3901 S. Ocean Drive, # 12G.			NAM	1						
CITY-ST-ZIP		ocean Drive, - wood, FL 33c		11	ET ADDRESS -ST-ZIP						
TITLE	Directo		☐ Delete	TITLE	-	===		г	Change	Addition	
NAME	James	E Davis		NAME	<u> </u>			_			
STREET ADDRESS CITY-ST-ZIP	1006 W. ISTA Street				ET ADDRESS -ST-ZIP						
TITLE	Directo	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Delete	TITLE						Addition	
NAME	Mauri	e Klee	L. Delete	NAME				L	Change	L Addition	
STREET ADDRESS	1951 _ 1	Burr Street		STREE	ET AODRESS					<u> </u>	
CITY-ST-ZIP	Fairtie	1d, CT 0643		CITY-	ST-ZIP		1774				
TITLE NAME	Directo		☐ Delete	TITLE					☐ Change	☐ Addition	
STREET ADDRESS	Willia 129 A			II .	ET ADDRESS					j	
CITY-ST-ZIP	Conco		a	CITY-	ST-ZIP						
TITLE	Directo	The solution T	☐ Delete	TITLE	-				Change	Addition	
NAME STREET ADDRESS	Klaus	Laschke Lontelaire Dri	vc	NAME STREE	T ADDRESS					}	
CITY-ST-ZIP	West			II	ST-ZIP						
indicated	ertify that the	information supplied with this	s filing does not qualify for t	/ cianati	ura ehall ha	wa tha cama k	19.07(3)(i), Florida Statutes. I fur egal effect as if made under oath	· that I am	an officer	or director (	
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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.											