

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**


FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90190 026 ***150.00

0378903 AV

DOCUMENT # P02000008174

1. Entity Name
JOURNAL SERVICES OF SOUTHEAST FLORIDA, INC.



Principal Place of Business
3111 SOUTH DIXIE HWY STE 222-35
WEST PALM BEACH FL 33405

Mailing Address
3111 SOUTH DIXIE HWY STE 222-35
WEST PALM BEACH FL 33405



2. Principal Place of Business
3111 S. Dixie Hwy.
Suite, Apt. #, etc.
Ste. 306-B

3. Mailing Address
P.O. Box 6205
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
West Palm Beach, FL

City & State
West Palm Beach, FL

4. FEI Number
61-1403770

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

Zip 33405 **Country** USA **Zip** 33405 **Country** USA

6. Name and Address of Current Registered Agent

SUSMAN, EDWARD
3111 SOUTH DIXIE HWY STE 222-35
WEST PALM BEACH FL 33405

7. Name and Address of New Registered Agent

Name Edward Susman
Street Address (P.O. Box Number is Not Acceptable)
3111 S. Dixie Hwy., Suite 306-B
City West Palm Beach, FL Zip Code 33405

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Edward Susman* DATE: 2/27/03

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PRESIDENT <input type="checkbox"/> Delete
NAME	EDWARD SUSMAN
STREET ADDRESS	306 GREYMON DR
CITY-ST-ZIP	W. Palm Beach FL 33405
TITLE	SR. VICE PRESIDENT <input type="checkbox"/> Delete
NAME	CAROLYN SUSMAN
STREET ADDRESS	306 GREYMON DR
CITY-ST-ZIP	W. Palm Beach FL 33405
TITLE	VICE PRESIDENT <input type="checkbox"/> Delete
NAME	PERRIE SUSMAN
STREET ADDRESS	306 GREYMON DR
CITY-ST-ZIP	W. Palm Beach FL 33405
TITLE	SECRETARY <input type="checkbox"/> Delete
NAME	PREDERIC SUSMAN
STREET ADDRESS	306 GREYMON DRIVE
CITY-ST-ZIP	W. Palm Beach FL 33405
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Edward Susman* DATE: 4/16/03 DAYTIME PHONE #: 561 835 2571

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)