2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P02000026361

Entity Name
 AVSOFT INC.



Feb 26, 2003 8:00 am Secretary of State

FILED

Principal Place of Business
C/O EDWARDS & ANGELL LLP
ONE CLEMATIS STREET. SUITE #400
WEST PALM BEACH FL 33401

Mailing Address
C/O EDWARDS & ANGELL, LLP
ONE CLEMATIS STREET, SUITE #400
WEST PALM BEACH FL 33401

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Principal Place of Business 3. Mailing Address													
1124 ROYAL PALM BEACH BLVD. 1129 ROYAL PA						M BEAZH BLUD							
Suite, Apt. #, etc. Suite, Apt. #, etc.									CHECK WES	DE IE NAMEINI	C CHANG	-0	
# 019 City & State City & State									CHECK HERE IF MAKING CHANGES				
ROYAL		BEACH , FL	ROY	y & State AL PALM I	ВЕАСН	. F	<u>'</u>	4. F	#6-04	69000	5 H	Applied For Not Applicable	
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6. Name and Address of Current Registered Agent							7. Name and Address of New Registered Agent						
ANGELL CORPORATE SERVICES, INC.						Name MICHAEL SPRITZER							
C/O EDWARDS & ANGELL, LLP						Street Address (P.O. Box Number is Not Acceptable)							
ONE CLEMATIS STREET, SUITE #400							BERENFELD, SPRITZER, SHETHTER AND SHEER						
WEST PALM BEACH FL 33401						965	<u> 5</u>	D1:	XIE HIGKWAY,	THIRD			
						City	MIAN	11		FL	Zip Co	ode	
The above the obliga	e named entity	submits this statement to	or the purp	ose of changing its	registere	d office o	r registere	d age	nt, or both, in the State of f	lorida. I am	familiar wit	h, and accept	
)	8. The above named entity submits this reternent 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		1/1/								2/24	1/2		
*		printed name of registered agent	and title if app	olicable (NOT	E: Registered	Agent signs	ture required v	vhen rein	nstating)	DATE	1925		
1	ILE NOW!!!	FEE IS \$150.00			-		·					'	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State									Election Campaign F Trust Fund Contribut			00 May Be	
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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

SIGNATURE:

SIGNATURE PRESTEPHENE ... LONGSON.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/03

561 20 + 3172