

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000051796

FILED  
Jan 09, 2003  
Secretary of State

**Entity Name:** WALLY'S LEISURE SERVICES, INC.

**Current Principal Place of Business:**

9540 SOUTHWEST 102ND STREET  
MIAMI, FL 33176

**New Principal Place of Business:**

**Current Mailing Address:**

9540 SOUTHWEST 102ND STREET  
MIAMI, FL 33176

**New Mailing Address:**

**FEI Number:** 04-3661800

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

**Name and Address of New Registered Agent:**

VAZQUEZ, WALTER R PSTD  
9540 SW 102 ST  
MIAMI, FL 33176 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: WALTER VAZQUEZ

01/09/2003

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: PSTD ( ) Delete  
Name: VAZQUEZ, WALTER R  
Address: 9540 SOUTHWEST 102ND STREET  
City-St-Zip: MIAMI, FL 33176

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WALTER VAZQUEZ

PSTD

01/09/2003

Electronic Signature of Signing Officer or Director

Date