## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000073929

Entity Name: AVIS HOME TECHNOLOGIES INC

FILED Jan 15, 2003 Secretary of State

Entity Nai	me: AXIS HC	IME LECHNOLOGIES INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
555 61ST . VERO BE	AVENUE ACH, FL 3296	88			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
555 61ST . VERO BE	AVENUE ACH, FL 3296	88			
FEI Number	: 32-0021902	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
LUCK, LANCE L 18981 N MIAMI AVE #109 MIAMI, FL 33169			DAMPIER, YALE L 555 61ST AVE VERO BEACH, FL 32		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: YALE DAMPIER				01/15/2003	
	Electro	nic Signature of Registered Ag	ent	Date	
	mpaign Financir S AND DIREC	g Trust Fund Contribution(). CTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( LUCK, LANCE 18981 N MIAM MIAMI, FL 33	I AVE #109	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( DAMPIER, YA 555 61ST AVE VERO BEACH		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: YALE DAMPIER D 01/15/2003