

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000078104

FILED
Jan 05, 2003
Secretary of State

Entity Name: AUDIO VISIONS EAST, INC.

Current Principal Place of Business:

492 NORTHEAST MIDVALE STREET
PORT ST. LUCIE, FL 34983

New Principal Place of Business:

7570 S US HIGHWAY 1
PORT ST. LUCIE, FL 34952 US

Current Mailing Address:

492 NORTHEAST MIDVALE STREET
PORT ST. LUCIE, FL 34983

New Mailing Address:

7570 S US HIGHWAY 1
PORT ST. LUCIE, FL 34952 US

FEI Number: 13-4203401

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:

TRAINOR, STEVEN J
472 SE CROSSPOINT DR
PORT ST LUCIE, FL 34983 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: STEVEN J TRAINOR

01/05/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TRAINOR, HAROLD
Address: 492 NORTHEAST MIDVALE STREET
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VD () Delete
Name: TRAINOR, STEVEN J
Address: 492 NORTHEAST MIDVALE STREET
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: S (X) Delete
Name: TRAINOR, LISA
Address: 492 NORTHEAST MIDVALE STREET
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: T (X) Delete
Name: TRAINOR, CHRISTINE
Address: 492 NORTHEAST MIDVALE STREET
City-St-Zip: PORT ST. LUCIE, FL 34983

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TRAINOR, STEVEN J
Address: 472 SE CROSSPOINT DR
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VD (X) Change () Addition
Name: TRAINOR, LISA D
Address: 472 SE CROSSPOINT DR
City-St-Zip: PORT ST LUCIE, FL 34983

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

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: STEVEN J TRAINOR

PD

01/05/2003

Electronic Signature of Signing Officer or Director

Date