

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000087358

FILED
Mar 10, 2003
Secretary of State

Entity Name: SHOW SYSTEMS SOLUTIONS, INC.

Current Principal Place of Business:

5224 SOUTH ORANGE AVE.
SUITE C
ORLANDO, FL 32809

New Principal Place of Business:

5224 SOUTH ORANGE AVE.
SUITE C
ORLANDO, FL 32809 US

Current Mailing Address:

5224 SOUTH ORANGE AVE.
SUITE C
ORLANDO, FL 32809

New Mailing Address:

5224 SOUTH ORANGE AVE.
SUITE C
ORLANDO, FL 32809 US

FEI Number: 76-0709419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETER J FREULER, CPA
231 N. BERMUDA AVENUE
KISSIMMEE, FL 34741

Name and Address of New Registered Agent:

BROWN, TONI J
2210 LANGE ST
KISSIMMEE, FL 34744 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: TONI J BROWN

03/10/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BROWN, TONI J
Address: 2210 LANGE ST.
City-St-Zip: KISSIMMEE, FL 34744

Title: V () Delete
Name: PEDIGO, JOSEPH
Address: 522 WEST LYNWOOD AVE.
City-St-Zip: SAN ANTONIO, TX 78212

Title: D () Delete
Name: PANZELLA, THOMAS
Address: 65B BISHOPS GATE
City-St-Zip: GUILDERLAND, NY 12084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: TONI J BROWN

P

03/10/2003

Electronic Signature of Signing Officer or Director

Date