

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000102853

FILED
Jan 14, 2003
Secretary of State

Entity Name: LASTING IMPRESSIONS CARD CORPORATION

Current Principal Place of Business:

2440 SR 580, SUITE 12
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2440 SR 580, SUITE 12
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 55-0797003

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAMIRAND, JOHN A
2771 MONICA LANE
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LAMIRAND, JOHN A
Address: 2771 MONICA LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: V () Delete
Name: LAMIRAND, LAURA B
Address: 2771 MONICA LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: T () Delete
Name: LAMIRAND, SCOTT R
Address: 2771 MONICA LANE
City-St-Zip: PALM HARBOR, FL 34684

Title: V () Delete
Name: ROSE, MICHELLE L
Address: 2324 ELHURST CT.
City-St-Zip: SPRINGFIELD, IL 62704

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:

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: JOHN A. LAMIRAND

P

01/14/2003

Electronic Signature of Signing Officer or Director

Date