

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000103322

FILED
Jan 29, 2003
Secretary of State

Entity Name: AMERICAN STANDARD ROBOTICS, INC.

Current Principal Place of Business:

15009 N FLORIDA AVE #329
TAMPA, FL 33613

New Principal Place of Business:

625 11TH AVE NE
ST. PETERSBURG, FL 33701

Current Mailing Address:

15009 N FLORIDA AVE #329
TAMPA, FL 33613

New Mailing Address:

625 11TH AVE NE
ST. PETERSBURG, FL 33701

FEI Number: 04-3714406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MICIRE, JOHN
3375 US HWY 98 S BLD C STE 4
LAKELAND, FL 33803 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Change (X) Addition
Name: MICIRE, MARK J
Address: 625 11TH AVE NE
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D () Change (X) Addition
Name: HARKNESS, DEREK M
Address: 625 11TH AVE NE
City-St-Zip: ST. PETERSBURG, FL 33701

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: DEREK HARKNESS

D

01/29/2003

Electronic Signature of Signing Officer or Director

Date