2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000113251

Entity Name: LAW OFFICES OF CAPITA AND DUCHEINE, P.A.

FILED May 01, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3858 SHERIDAN STREET
HOLLYWOOD, FL 33021

3868 SHERIDAN STREET
HOLLYWOOD, FL 33021

Current Mailing Address: New Mailing Address:

3858 SHERIDAN STREET
HOLLYWOOD, FL 33021

3868 SHERIDAN STREET
HOLLYWOOD, FL 33021

HOLLYWOOD, FL 33021

FEI Number: 14-1858993 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAPITA, MARIE C

3858 SHERIDAN STREET

HOLLYWOOD, FL 33021 US

CAPITA, MARIE C

3868 SHERIDAN STREET

HOLLYWOOD, FL 33021 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: 05/01/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 PT
 () Delete

 Name:
 CAPITA, MARIE C

 Address:
 3858 SHERIDAN STREET

 City-St-Zip:
 HOLLYWOOD, FL 33021

Title: VS () Delete
Name: DUCHEINE, SANDRA
Address: 3959 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PT (X) Change () Addition

Name: CAPITA, MARIÉ C Address: 3868 SHERIDAN STREET City-St-Zip: HOLLYWOOD, FL 33021

Title: VS (X) Change () Addition

Name: DUCHEINE, SANDRA
Address: 3868 SHERIDAN STREET
City-St-Zip: HOLLYWOOD, FL 33021

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: MARIE C. CAPITA PT 05/01/2003