## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P02000118294

Entity Name: ALEPH CLERICI INC

MIAMI BEACH, FL 33139

FILED Apr 28, 2003 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

1132 PENNSYLVANIA AVENUE #4 1717 NORTH BAYSHORE DRIVE MIAMI BEACH, FL 33139

2147

MIAMI, FL 33132

**Current Mailing Address: New Mailing Address:** 

1132 PENNSYLVANIA AVENUE #4 1717 NORTH BAYSHORE DRIVE

2147

MIAMI, FL 33132

FEI Number: 16-1637744 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:

CLERICI, GABRIELE CLERICI, GABRIELE

1132 PENNSYLVANIA AVENUE #4 1717 NORTH BAYSHORE DRIVE

MIAMI BEACH, FL 33139 2147 MIAMI, FL 33132

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: GABRIELE CLERICI 04/28/2003

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:** 

Title: (X) Change ( ) Addition ( ) Delete Title:

CLERICI, GABRIELE CLERICI, GABRIELE Name: Name: 1132 PENNSYLVANIA AVENUE #4 Address: Address:

1717 NORTH BAYSHORE DRIVE# 2147 City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI, FL 33132

( ) Delete Title: Title: () Change () Addition CLERICI, AMERIGO Name: Name:

665 HIGH POINT #D Address: Address: City-St-Zip: DELRAY, FL 33445 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 Statutés. 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: GABRIELE CLERICI 04/28/2003 D