2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P93000081845

Entity Name: ERGO, INC.

FILED Apr 22, 2002 8:00 AM Secretary of State

Current Principal Place of Business:				New Princ	New Principal Place of Business:			
1372 BENNETT DRIVE #164 LONGWOOD, FL 32750								
Current Mailing Address:				New Mailir	New Mailing Address:			
103 PINEVI ALTAMONT	EW CR [E SPRINGS, F	L 32714						
FEI Number:	59-3214252	FEI Number A	pplied For()	FEI Number Not Appli	cable ()	Certificate of Sta	itus Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:								
MICHELS, 0 103 PINEVI ALTAMON1		L 32714	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:								
	Electronic	Signature of	f Registered Agen	t		Date		
This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:								
Title: Name: Address: City-St-Zip:	PVTD () D MICHELS, CYNTH 103 PINEVIEW C ALTAMONTE SPR	IIA D IR		Title: Name: Address: City-St-Zip:		() Change () Addition	on	
Title: Name: Address: City-St-Zip:	D () D LUKASIK, FRANK 1250 W MARION PUNTA GORDA, F	elete AVENUE, #142		Title: Name: Address: City-St-Zip:		()Change ()Additio	on	
Title: Name: Address: City-St-Zip:	D () D IRONS, EDWARD 8701 S W 100TH MIAMI, FL 33176	STREET		Title: Name: Address: City-St-Zip:		() Change () Addition	on	
Title: Name: Address: City-St-Zip:	D () D SHINN, WILLIAM 30540 BROOKHA GREEN OAKS, IL	R VEN DR		Title: Name: Address: City-St-Zip:		() Change () Addition	n	
Title: Name: Address: City-St-Zip:	D () D ALLEN, MASON 1380 LAKESHOR MOUNT DORA, FI	E DR		Title: Name: Address: City-St-Zip:	MCDONALD	107 TERRACE	on	
Title: Name: Address: City-St-Zip:	D () D TURNER, MICHAE 11124 ROCKPOR ORLANDO, FL 32	T ST		Title: Name: Address: City-St-Zip:		() Change () Addition	on	
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								

SIGNATURE: CYNTHIA D MICHELS D

above, or on an attachment with an address, with all other like empowered.

MITCHELL WEINSTEIN 1083 S W 156 TERRACE PEMBROKE PINES, FL 33027