

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000002266

FILED
Mar 06, 2003
Secretary of State

Entity Name: ISLAND LADY SIGHTSEEING TOURS, INC.

Current Principal Place of Business:

% BAYSIDE MARINA DOCK OFFICE
401 BISCAYNE BLVD
MIAMI, FL 33132

New Principal Place of Business:

Current Mailing Address:

555 NE 1ST STRET
SUITE 102
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 65-0459847

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SOFGE, FLORA M
14708 STIRRUP LANE
WELLINGTON, FL 33414

Name and Address of New Registered Agent:

SOFGE, CHARLES E
555 NW 15TH ST STE102
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: CHARLES E. SOFGE

03/06/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SOFGE, CHARLES
Address: 114 W SAN MARINO DR.
City-St-Zip: MIAMI, FL 33132

Title: D () Delete
Name: SOFGE, FLORA
Address: 14708 STIRRUP LANE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CHARLES E. SOFGE

D

03/06/2003

Electronic Signature of Signing Officer or Director

Date