2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P94000027095

Entity Name: MBSL GROUP, INC.

Address:

City-St-Zip:

424 CENTRAL AVE. 5TH FLOOR

ST PETERSBURG, FL 33701

FILED Apr 26, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 424 CENTRAL AVE STE. 500 ST PETERSBURG, FL 33701 US **New Mailing Address: Current Mailing Address:** 424 CENTRAL AVE STE. 500 ST PETERSBURG, FL 33701 US FEI Number: 59-3234205 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: MCPARTLAND, FRANK J. 424 CENTRAL AVE. STE. 500 ST PETERSBURG, FL 33701 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 Registered Agent 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: () Delete () Change () Addition TERLIP, JOHN J Name: Name: 2418 WOODLAWN CIRCLE EAST Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33701 City-St-Zip: DEVP Title: Title: () Delete (X) Change () Addition HAZELIP, T RADFORD SEC, TR Name: HAZELIP, T RADFORD Name: 424 CENTRAL AVE, STE 500 424 CENTRAL AVE, STE 500 Address: Address: SAINT PETERSBURG, FL 33701 SAINT PETERSBURG, FL 33701 City-St-Zip: City-St-Zip: () Delete Title: CD Title: () Change () Addition MCPARTLAND, FRANK J Name: Name: 424 CENTRAL AVE STE 500 Address: Address: ST. PETERSBURG, FL 33701 City-St-Zip: City-St-Zip: Title: DST (X) Delete Title: () Change () Addition AYOTTE, RICHARD A Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: FRANK J. MCPARTLAND C 04/26/2002