


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91149 017 \*\*\*150.00

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<b>DOCUMENT #</b> P94000050506	
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<b>1. Entity Name</b> ERSAL CORPORATION	<b>Principal Place of Business</b> 58 CITRUS PARK LANE BOYNTON BEACH FL 33436 US	<b>Mailing Address</b> 58 CITRUS PARK LANE BOYNTON BEACH FL 33436 US
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<b>2. Principal Place of Business</b> 12243 Brisbane Lane Suite, Apt. #, etc.	<b>3. Mailing Address</b> 12243 Brisbane Lane Suite, Apt. #, etc.
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☐ CHECK HERE IF MAKING CHANGES

<b>City &amp; State</b> Wellington, FL	<b>City &amp; State</b> Wellington, FL
<b>Zip</b> 33414	<b>Country</b> USA

<b>4. FEI Number</b> 65-0503475	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

<b>6. Name and Address of Current Registered Agent</b> CLARKE, VIVIANNE 58 CITRUS PARK LANE BOYNTON BEACH FL 33436
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<b>7. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) 12243 Brisbane Lane City Wellington FL Zip Code 33414
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<b>8. 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. I am familiar with, and accept the obligations of registered agent.</b> SIGNATURE  VIVIANNE CLARKE 4/29/03 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE
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**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> CLARKE, ERROL <input type="checkbox"/> Delete 58 CITRUS PARK LANE BOYNTON BEACH FL
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> CLARKE, VIVIANNE A <input type="checkbox"/> Delete 58 CITRUS PARK LANE BOYNTON BEACH FL
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12243 Brisbane Lane Wellington, FL 33414
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12243 Brisbane Lane Wellington, FL 33414
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.**

<b>SIGNATURE:</b>  VIVIANNE CLARKE 4/29/03 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #
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CR2E034 (10/02)