2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2002 8:00 AM
Secretary of State

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Entity Name: CONVENTION AND MEETING CONSULTANTS CORPORATION

Current Principal Place of Business:

1453 55TH ST
BROOKLYN, NY 11219 US

New Principal Place of Business:

43 RAMONA AVENUE
STATEN ISLAND, NY 10312 US

Current Mailing Address:

1453 55TH ST
BROOKLYN, NY 11219 US

New Mailing Address:

43 RAMONA AVENUE
STATEN ISLAND, NY 10312 US

FEI Number: 65-0537131 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COWEN, SHIRLEY A
11058 NW 2ND TERRACE
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

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:

Title: CDT ( ) Delete
Name: BACHELLER, CRAIG L
Address: 1453 55TH STREET
City-St-Zip: BROOKLYN, NY 11219

Title: DSP ( ) Delete
Name: BACHELLER, MARY J
Address: 1453 55TH STREET
City-St-Zip: BROOKLYN, NY 11219

Title: V ( ) Delete
Name: MOSLEH, GARY D
Address: 1453 55TH ST
City-St-Zip: BROOKLYN, NY 11219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDT (X) Change ( ) Addition
Name: BACHELLER, CRAIG L
Address: 43 RAMONA AVENUE
City-St-Zip: STATEN ISLAND, NY 10312 US

Title: DSP (X) Change ( ) Addition
Name: BACHELLER, MARY J
Address: 43 RAMONA AVENUE
City-St-Zip: STATEN ISLAND, NY 10312 US

Title: V (X) Change ( ) Addition
Name: COWEN, SHIRLEY A
Address: 11058 NW 2ND STREET
City-St-Zip: MIAMI, FL 33172

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: SHIRLEY A COWEN V 07/15/2002

Electronic Signature of Signing Officer or Director Date