

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000009976

FILED
Apr 02, 2003
Secretary of State

Entity Name: SPICE OF LIFE OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

2940 SW 30TH AVE
SUITE 2
PEMBROKE PINES, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

44 W FLAGLER ST
350 COURTHOUSE TOWER
MIAMI, FL 33130 US

New Mailing Address:

FEI Number: 65-0554596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUBIN, SCOTT L ESQ.
44 W. FLAGLER STREET
350 COURTHOUSE TOWER
MIAMI, FL 33130 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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SIEGEL, SHELDON
Address: 1450 SW 87 AVE
City-St-Zip: PEMBROKE PINES, FL

Title: D () Delete
Name: MYERS, WES
Address: 7120 EMBASSY BLVD.
City-St-Zip: MIRAMAR, FL 33023

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: WESLEY MYERS

D

04/02/2003

Electronic Signature of Signing Officer or Director

Date