

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000051432

FILED  
Apr 29, 2002 8:00 AM  
Secretary of State

Entity Name: STERILUX, INC.

## Current Principal Place of Business:

1708 N. FEDERAL HIGHWAY  
LAKE WORTH, FL 33460

## New Principal Place of Business:

## Current Mailing Address:

C/O ROBERT O'BRIEN  
4620 LEE HWY., STE. 202  
ARLINGTON, VA 22207 US

## New Mailing Address:

FEI Number: 65-0599125

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ENDRUSCHAT, ALBERT J DDS  
1708 N. FEDERAL HIGHWAY  
LAKE WORTH, FL 33460 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: S ( ) Delete  
Name: HUME, KATHRYN M  
Address: 5041 BASS CT  
City-St-Zip: WALDORF, MD 20603

Title: D ( ) Delete  
Name: DONOVAN, JAMES J  
Address: 3830 JOG RD  
City-St-Zip: LAKE WORTH, FL 33467

Title: D ( ) Delete  
Name: GURNEY, WILLIAM  
Address: 1453  
City-St-Zip: LOXAHATCHEE, FL 33470

Title: DTV ( ) Delete  
Name: O'BRIEN, ROBERT A  
Address: 4620 LEE HWY STE 202  
City-St-Zip: ARLINGTON, VA 22207

Title: D ( ) Delete  
Name: RITOTA, THEODORE C  
Address: 3401 S FEDERAL HWY  
City-St-Zip: DELRAY BCH, FL

Title: P ( ) Delete  
Name: ENDRUSCHAT, AJ  
Address: 1708 N FEDERAL HIGHWAY  
City-St-Zip: LAKE WORTH, FL 33460

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT A. O'BRIEN

DTV

04/29/2002

Electronic Signature of Signing Officer or Director

Date