FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State

DOCUMENT # P95000053314 1. Entity Name LIFE PRODUCTS, INC.						05-08-2002 90140 032 ***150.00			
	DO NOT WRITE	IN THIS SI	PAC						
2. Principal Place of Business 1804 Valencia Drive 3. Mailing Address 1804 Valencia								٠	
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRITE IN THIS SPACE			
City & State Deerfie	eld Beach, Florida	City & State Deerfield Beach, Florida			4. 1	FEI Number		Applied For Not Applicable	
Zip33442 Country USA		Zip 33442 Country US		USA	5. (5. Certificate of Status Desired S8.75 Additional Fee Required			
		-	-	Name DAT		me and Address of Current Registered BURGESS	Agent		
DO NOT WRITE IN THIS SPACE						P.O. Box Number is Not Acceptable)			
				1001 Varences Dilve					
				City Deer	eerfield Beach, FL 3442				
8. The above	named entity submits this statement for	the purpose of changing its	register	ed office or registe	ered ag	ent, or both, in the State of Florida.		· · · · · · · · · · · · · · · · · · ·	
SIGNATURE									
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) January 1 - May After May 1, Amended U Make Check Payable				is \$550.00 is \$61.25	ate	Election Campaign Financing Trust Fund Contribution.	\$ Ac	5.00 May Be	
11.	OFFICERS AND D			· · · · · · · · · · · · · · · · · · ·					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BURGESS, PAUL D. 1804 Valencia Drive Deerfield Beach, Florida 33442							CR2E034B (12/01)	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP									
NAME STREET ADORESS CITY-ST-ZIP			CITY-	ET ADDRESS ST-ZIP					
13. 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 11 or on an attachment with an address, with all other like empowered.									
SIGNATURE: Paul D. Burgess-President 04/22/02 (954)360-7884 SIGNATURE AND TYPED OR PRINTED BY SIGNATURE OF SI									