

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2002 8:00 am
Secretary of State

05-24-2002 91305 018 ***150.00

0152004 AV

DOCUMENT # P96000003201

1. Entity Name
LASER BUSINESS SYSTEMS, INC.

Principal Place of Business
**3190 SOUTH STATE RD. 7
 BAY 13
 MIRAMAR FL 33023
 US**

Mailing Address
**3190 SOUTH STATE RD. 7
 BAY 13
 MIRAMAR FL 33023
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0634866

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**REID, FRANCIS
 3600 S STATE ROAD, SUITE #15
 MIRAMAR FL 33023**

Name **Reid, FRANCIS**
 Street Address (P.O. Box Number and Apt. Address) **3190 S. State Road 7, Bay #13**
 City **Miramar** FL **33023**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
S	AUBOURG, GAURETY	3600 S STATE ROAD 7, SUITE #15	MIRAMAR FL 33023	<input type="checkbox"/>
O	WYATT-GADSON, SANDRA	3600 S STATE RD 7, STE 15	MIRAMAR FL 33023	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
S	Aubourg, Gaurety	3190 S. State Road 7, Bay #13	Miramar FL 33023	<input checked="" type="checkbox"/>	<input type="checkbox"/>
O	Wyatt-Gadson, Sandra	3190 S. State Road 7, Bay #13	Miramar FL 33023	<input checked="" type="checkbox"/>	<input type="checkbox"/>
O	Michal Wilson	3190 S. State Road 7, Bay #13	Miramar FL 33023	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

64-24-02

9549667960

Date

Daytime Phone #

CR2E034 (9/01)