

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000004957

FILED
Sep 10, 2003
Secretary of State

Entity Name: THE WOODWORKS, INC.

Current Principal Place of Business:

510 NE 28TH COURT
POMPANO BEACH, FL 33064 US

New Principal Place of Business:

Current Mailing Address:

510 NE 28TH COURT
POMPANO BEACH, FL 33064 US

New Mailing Address:

FEI Number: 65-0634964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINSON, DAVID W
9215 S.W. 49TH PLACE
COOPER CITY, FL 33021 US

Name and Address of New Registered Agent:

LEVINSON, DAVID W
9215 S.W. 49TH PLACE
COOPER CITY, FL 33328 US

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:

09/10/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: LEVINSON, DAVID W
Address: 9215 S.W. 49TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: V () Delete
Name: LEVINSON, HOLLY
Address: 9215 S.W. 49TH PLACE
City-St-Zip: FORT LAUDERDALE, FL 33328

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: HOLLY LEVINSON

VP

09/10/2003

Electronic Signature of Signing Officer or Director

Date