

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000012069

FILED
Mar 27, 2003
Secretary of State

Entity Name: ERDA, INC.

Current Principal Place of Business:

461 WAVECREST
ONE NORTH BREAKERS ROW
PALM BEACH, FL 33480

New Principal Place of Business:

Current Mailing Address:

C/O BARRYB P. PINCISS
ONE NORTH BREAKERS ROW
PALM BEACH, FL 33480 US

New Mailing Address:

C/O BARRY P. PINCISS
ONE NORTH BREAKERS ROW
PALM BEACH, FL 33480 US

FEI Number: 65-0647111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PINCISS, BARRY P
461 WAVECREST
ONE NORTH BREAKERS ROW
PALM BEACH, FL 33480

Name and Address of New Registered Agent:

PINCISS, BARRY P MR.
461 WAVECREST
ONE NORTH BREAKERS ROW
PALM BEACH, FL 33480

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: BARRY P. PINCISS

03/27/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PINCISS, BARRY P
Address: 461 WAVECREST - ONE NORTH BREAKERS ROW
City-St-Zip: PALM BEACH, FL 33480

Title: D () Delete
Name: WARSHAVER, JOANNE
Address: 461 WAVECREST - ONE NORTH BREAKERS ROW
City-St-Zip: PALM BEACH, FL 33480

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: PINCISS, BARRY P MR.
Address: 461 WAVECREST - ONE NORTH BREAKERS ROW
City-St-Zip: PALM BEACH, FL 33480

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: BARRY P. PINCISS

D

03/27/2003

Electronic Signature of Signing Officer or Director

Date