

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 91743 031 ***150.00

DOCUMENT # *P96000036196*
1. Entity Name
American Speakers Bureau Corporation
59-3357541

012320

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10157 University Blvd
Suite, Apt. #, etc.
197
City & State
Orlando, FL
Zip
32817 Country
USA

3. Mailing Address
10157 University Blvd
Suite, Apt. #, etc.
197
City & State
Orlando FL
Zip
32817 Country
USA

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3357541

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
Frank J. Candy

Street Address (P.O. Box Number is Not Acceptable)
10157 University Blvd. #197

City
Orlando FL Zip Code
32817

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 *Frank J. Candy* DATE *5-14-02*

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 ***			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President FRANK J. Candy 10157 University Blvd #197 Orlando, FL 32817</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *Frank J. Candy* DATE *5-14-02* Daytime Phone # *407-826-4298*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)