

FILED
May 07, 2003 8:00 am
Secretary of State

05-07-2003 90138 017 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

00110007

DOCUMENT # P96000048738

1. Entity Name
ROSS, FORSTER, SCILLIA & BROOKS, INC.
LAUDERDALE CONSULTING, INC.

Principal Place of Business
2805 EAST OAKLAND PARK BLVD.
PMB 110
FT. LAUDERDALE, FL 33306

Mailing Address
2805 EAST OAKLAND PARK BLVD.
PMB 110
FT. LAUDERDALE, FL 33306

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number **91-1779213** Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
SCILLIA, MICHAEL V
2805 EAST OAKLAND PARK BLVD., PMB 110
FT. LAUDERDALE, FL 33306

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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. I am familiar with, and accept the obligations of, the registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when entering only)

FILE NOW! FEE IS \$150.00.
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCILLIA, MICHAEL V 2805 E OAKLAND PARK BLVD., PMB 110 FT LAUDERDALE, FL 33306	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, AS ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S APPELBLATT, GARY M 240 AMERICAN RIVER DR, CTE #112 SACRAMENTO, CA 95804	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3640 American River Dr, Suite 112 Sacramento, Calif. 95864 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS SCILLIA, ANGELA G 2805 E OAKLAND PARK BLVD, PMB 110 FT LAUDERDALE, FL 33306	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with an alter like empowered.

SIGNATURE: Michael V. Scillia **5/1/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/02)