2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

Principal Place of Business

P96000062925

Mailing Address

1. Entity Name

STEVEN W. KAISER, INC.



Jan 10, 2003 8:00 am Secretary of State 01-10-2003 90086 033 ***150.00

FILED

Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Country Zip Country Size Address of New Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address of New Registered Agent Size Country Size Address (P.O. Box Number is Not Acceptable) Size 120 FORT LAUDERDALE FL 33328 City FL Ziz Code City FL Ziz Code City FL Ziz Code City FL Ziz Code Size Address (P.O. Box Number is Not Acceptable) Divide Check Payable to Florida Department for the purpose of changing is registered adent in the size of Fords. In the Size of	4801 S. UNIVI SUITE 120 FORT LAUDEI	RDALE FL 333		SUITE	4801 S. UNIVERSITY DR SUITE 120 FORT LAUDERDALE FL 33328								
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S. Certificate of Status Desired St. Additional Fee Required Agent T. Name and Address of New Registered Agent T. Name and Address T. Name and Address of New Registered Agent T. Name and Address T. Name and Addre		te		City	City & State			4.	4. FEI Number 65-0732798		\rightarrow		
KAISER, STEVEN W 4801 S. UNIVERSITY DR STE 120 FORT LAUDERDALE FL 33328 6. The above named entity submets this statement for the purchase of changing its registered office or registered eigent, or both, in the State of Rorda. I am familiar with, and accept the outligations of registered agent. SIGNATURE Signature, typed of pretect name of registered agent and to a registered common or registered eigent, or both, in the State of Rorda. I am familiar with, and accept the outligations of registered agent. Signature registered eigent, or both, in the State of Rorda. I am familiar with, and accept the outligations of registered agent. SIGNATURE Signature, typed of pretect name of registered agent and to a registered office or registered eigent, or both, in the State of Rorda. I am familiar with, and accept the outlier of registered agent. SIGNATURE Signature, typed of pretect name of specific agent. Online Online					,		Country		Certificate of Status Desired [
KAISER, STEVEN W 4801 S, UNIVERSITY DR STE 120 FORT LAUDERDALE FL 33228 City FL Zip Code 8. The above named entity submits this statement for the purcose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE TILE MOWN!! FEE IS S150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 NAME AMME AND STRET ADDRESS OTY-S1-ZP TILE NAME STRET		6. Name	and Address of Cu	rrent Register	ed Agent -			. 7	Name and Address of New Regis	tered Age	nt		
E. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. Signature	KAISER, STEVEN W 4801 S. UNIVERSITY DR												
SIGNATURE Signature Signa	J	iderdale f	L 33328				City		Zip Code			de e	
SIGNATURE Signature, typed or periode name of registered agend and cite if applicable. (NOTE: Registered Agent signature required when roteratation) DATE:	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. Lam familiar with and accept												
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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 all other like empowered. 954-434

SIGNATURE: .

SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

4012