2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000039224

4503 SW 79TH TERR.

MIAMI, FL 33173

Address:

City-St-Zip:

Entity Name: LASERVICE ENTERPRISES, INC.

FILED Jan 26, 2002 8:00 AM Secretary of State

Current Principal Place of Business:	New Principal Place of Business:	
18742 SW 105 PLACE MIAMI, FL 33157	8775 SW 129 TERRACE MIAMI, FL 33176	
Current Mailing Address:	New Mailing Address:	
18742 SW 105 PLACE MIAMI, FL 33157	8775 SW 129 TERRACE MIAMI, FL 33176	
FEI Number: 65-0753937 FEI Number Applied For () FEI Nu	Imber Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:	
GALLO, KATHLEEN L 7840 SW 180 TERR. MIAMI, FL 83157 US	GALLO, KATHLEEN L 7840 SW 180 TERR. MIAMI, FL 33157 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:			01/26/2002	
	Electronic Signature of Registere	d Agent	Date	
•	ation is eligible to satisfy its Intangible Tax fili mpaign Financing Trust Fund Contribution (
OFFICERS AND DIRECTORS:		ADDITIONS/CHAI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DT () Delete GRIFFITH, JEFFREY D 2102 HAVERFORD DR CLEARWATER, FL 34621	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DPS () Delete GALLO, KATHLEEN L 7840 SW 180 TERR. MIAMI, FL 33157	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	DV (X) Delete PELAEZ, JOSE	Title: Name∶	() Change () Addition	

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:	KATHLEEN L. GALLO	DPS	01/26/2002
	Electronic Signature of Signing Officer or Director		Date