2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# P97000044478

Entity Name: AREL ADVERTISING INDUSTRIES IN MARKETING & MERCHANDISING, INC.

Current Principal Place of Business:

468 NE 206 LN
SUITE 107
N MIAMI BEACH, FL 33179

New Principal Place of Business:

Current Mailing Address:

468 NE 206 LN
SUITE 107
N MIAMI BEACH, FL 33179

New Mailing Address:

FEI Number: 65-0755861 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AREL, PAUL M
468 NE 206 LN
SUITE 107
N MIAMI BEACH, FL 33179

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: AREL, MAURICE S
Address: 468 NE 206 LN SUITE 206
City-St-Zip: N MIAMI BEACH, FL 33179

Title: DV ( ) Delete
Name: AREL, PAUL M
Address: 468 NE 206 LN SUITE 107
City-St-Zip: N MIAMI BEACH, FL 33179

Title: DV ( ) Delete
Name: AREL, KEVIN A
Address: 1211 N 75 AVE
City-St-Zip: HOLLYWOOD, FL 33024

Title: DT ( ) Delete
Name: FLORIO, ELAINE
Address: 15396 SW 40 CT
City-St-Zip: MIRAMAR, FL 33027

Title: DS ( ) Delete
Name: AREL, ROSEMARIE
Address: 468 NE 206 LN SUITE 206
City-St-Zip: N MIAMI BEACH, FL 33179

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: PAUL M AREL DV 04/28/2003

Electronic Signature of Signing Officer or Director — Date