2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000052183

1. Entity Name

SIERRA RESOURCES INTERNATIONAL, INC.

Principal Place of Business Mailing Address 2103 ISLE OF PALMS DRIVE 2103 ISLE OF PALMS DRIVE VALRICO FL 33594-7256 VALRICO FL 33594 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

FILED Feb 20, 2000 8:00 am Secretary of State

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DO NOT WRITE IN THIS SPACE

59-3451574

Applied For

4. FE! Number

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PIERCE, M. WEBSTER 203 SOUTH PARSONS AVENUE BRANDON FL 33511 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 Ponda. SIGNATURE Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent with a statement for the purpose of changing its registered office or registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent, or both, in the State of Ponda. Signature, fixed or primate name of registered agent in the fixed agent in the fixed of the purpose of the fixed agent in	Zip		Country	Zip	ry	5. (
PIERCE, M. WEBSTER 203 SOUTH PARSONS AVENUE BRANDON FL 33511 Street Address (P.C. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code 6. 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 9. This corporation is eligible to satisfy its intangible Tax tining requirement and elicits to do so (See criteria on back) After MAY 1, 2000 Fee will be \$550.00 The Bection Campaign Financing The Control of State Address Street Address City St. 2P The Control of State The Control of State		6. Name	and Address of Current F	Registered Agent			7. N	lame and Address of New R	egistered	Agent		
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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 direct	13. I hereby of	certify that the	ne information supplied with	this filing does not qualify for	or the exe	mption state	d in Section ve the same	119.07(3)(i), Florida Statutes. legal effect as if made under	I further co	ertify that the i am an officer	nformation 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 Bl changed, or on an attachment with an address, with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR