## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000053191

City-St-Zip:

RIVERVIEW, FL 33569

Entity Name: PRUDENTIAL BUSINESS GROUP INC

FILED Apr 30, 2002 8:00 AM Secretary of State

	mer TROBE	VII/LE BOOK LEGO OF COOF, IIV	J.		
Current Principal Place of Business:			New Principal F	New Principal Place of Business:	
4109 LAND O' LAKES BLVD. LAND O' LAKES, FL 34639			# 207	11142 NORTH 30 STREET # 207 TAMAP, FL 33612	
Current M	lailing Addre	ss:	New Mailing Ac	New Mailing Address:	
P.O. BOX RIVERVIE	1190 W, FL 33568				
FEI Number: 59-3596211 FEI Number Applied For ( )			FEI Number Not Applicable	( ) Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Addi	Name and Address of New Registered Agent:	
ABUIMAISH, GHASSAN 4109 LAND O' LAKES BLVD. LAND O' LAKES, FL 34639 US			P.O.BOX 1190	ABUIMAISH, GHASSAN P.O.BOX 1190 RIVERVIEW, FL 33568 US	
	named entity of Florida.	submits this statement for the	ourpose of changing its reg	istered office or registered agent, or both,	
SIGNATUR	RE:			04/30/2002	
	Electro	nic Signature of Registered Ag	ent	Date	
		o satisfy its Intangible Tax filing red g Trust Fund Contribution (  ).	uirement and elects to do so (	X).	
OFFICERS AND DIRECTORS:			ADDITIONS/CH	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P ( ABUIMAISH, G 12225 SHADY RIVERVIEW, F	FOREST DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V ( ABUIMAISH, A 10218 EVENIN RIVERVIEW, F	IG TRAIL DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	S ( ABUIMAISH, F 12225 SHADY		Title: Name: Address:	( ) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: GHASSAN ABUIMAISH P 04/30/2002