## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000061525

Entity Name: EAST WEST COMMUNICATIONS, INC.

680 W INDUSTRIAL AVE #4

BOYNTON BEACH, FL 33426

Address:

City-St-Zip:

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

**Current Principal Place of Business: New Principal Place of Business:** 16 SPANISH RIVER DR 620 MANATEE BAY DRIVE OCEAN RIDGE, FL 33435 BOYNTON BEACH, FL 33435 **Current Mailing Address: New Mailing Address:** 16 SPANISH RIVER DR 620 MANATEE BAY DRIVE OCEAN RIDGE, FL 33435 US BOYNTON BEACH, FL 33435 US FEI Number: 65-0775179 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: YOHE, MARK D 680 W INDUSTRIAL AVE #4 US BOYNTON BEACH, FL 33426 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 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition STEVENSON, JAMES P STEVENSON, JAMES P Name: Name: 16 SPANISH RIVER DR 620 MANATEE BAY DRIVE Address: Address: City-St-Zip: OCEAN RIDGE, FL 33435 City-St-Zip: BOYNTON BEACH, FL 33435 Title: VSD Title: () Change () Addition () Delete ROSENBERG, GENE Name: Name: 10348 186TH CT SO Address: Address: BOCA RATON, FL 33498 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition YOHE, MARK D Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: JAMES P. STEVENSON PD 04/30/2002