FILED

Feb 03, 2003 8:00 am

Secretary of State

## **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR**

## P97000087016 DOCUMENT #



02-03-2003 90076 049 \*\*\*150 00 1. Entity Name AMBIENT ENVIRONMENTAL, INC. Principal Place of Business Mailing Address 1877 SOUTH WEST 25TH STREET 55 WEST 39TH ST 90016502 MIAMI FL 33133 12TH FLR NEW YORK NY 10018 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0788771 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHAMORRO, ARMANDO Street Address (P.O. Box Number is Not Acceptable) 1877 SOUTH WEST 25TH STREET **MIAMI FL 33133** City Zip Code 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 Florida. I am familiar with, and accept the obligations of registered agent. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete ☐ Addition TITLE ☐ Change CHAMORRO, ARMANDO NAME NAME 1877 SOUTH WEST 25TH STREET STREET ADDRESS STREET ADDRESS **MIAMI FL 33133** CITY-ST-ZIP CITY-ST-ZIP ۷P TITLE ☐ Delete TITLE Change M Addition LEITNER, JOHN NAME NAME 750 RUSHMORE AVE STREET ADDRESS STREET ADDRESS MAMARONECK NY 10543 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TIT! F Change ☐ Addition Esposito, William ESPOSITO, WILLIAM NAME NAME 150 Franklin Street 77 5TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10011 CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

SIGNATURE AND TYPED OR PRINTED NAME OF

Delete

Daytime Phone #

☐ Change

☐ Addition