

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2000 8:00 am
Secretary of State

02-01-2000 90135 019 ***150.00

DOCUMENT # P98000038353

1. Entity Name

LIGHTHOUSE TECHNOLOGIES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

29644 MORWEN
 WESELY CHAPEL FL 33543

5450 COUNTY RD 581
 PMB 113
 WESELY CHAPEL FL 33543-9242
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3504883**

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MORAN, RONALD
29644 MORWEN
WESELY CHAPEL FL 33543

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Ronald Moran

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/27/2000

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	PORTER, DEANA L	
STREET ADDRESS	14335 GLASTONBURY	
CITY-ST-ZIP	DETROIT MI 48223	
TITLE	V	<input type="checkbox"/> Delete
NAME	LOCKE, DEREK J	
STREET ADDRESS	6160 BARGER	
CITY-ST-ZIP	DEARBORN HEIGHTS MI 48127	
TITLE	S	<input type="checkbox"/> Delete
NAME	MORGAN, RONALD	
STREET ADDRESS	29644 MORWEN PL	
CITY-ST-ZIP	WESLEY CHAPEL FL 33543	
TITLE	T	<input type="checkbox"/> Delete
NAME	LOCKE, DIANNE F	
STREET ADDRESS	6160 BARGER	
CITY-ST-ZIP	DEARBORN HEIGHTS MI 48127	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
NAME	LOCKE, DEREK J	
STREET ADDRESS	6160 BARGER	
CITY-ST-ZIP	DEARBORN HEIGHTS, MI 48127	
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
NAME	MORGAN RONALD	
STREET ADDRESS	29644 MORWEN PL	
CITY-ST-ZIP	Wesley Chapel, FL 33543	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/>
NAME	LOCKE, DIANNE F	
STREET ADDRESS	6160 BARGER	
CITY-ST-ZIP	DEARBORN HEIGHTS, MI 48127	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/>
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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

SIGNATURE: *Ronald Moran*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/27/2000 (813) 907-1724
 Date Daytime Phone #