2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2002 8:00 AM
Secretary of State

DOCUMENT# P98000044971

Entity Name: PERFORMANCE AT WORK, INC.

Current Principal Place of Business:

7598 PINEWALK DR S
MARGATE, FL 33063

New Principal Place of Business:

Current Mailing Address:

7598 PINEWALK DR S
STE 362
MARGATE, FL 33063

New Mailing Address:

7598 PINEWALK DR S
MARGATE, FL 33063

FEI Number: 65-0844957 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BREWSTER, PAMELA MARY
7598 PINEWALK DR S
MARGATE, FL 33063

Name and Address of New Registered Agent:

BREWSTER, PAMELA M
7598 PINEWALK DR S
MARGATE, FL 33063

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: PAMELA M BREWSTER 03/21/2002
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:

Title: P ( ) Delete
Name: BREWSTER, PAMELA
Address: 7598 PINEWALK DR. S.
City-St-Zip: MARGATE, FL 33063

Title: VP ( ) Delete
Name: BREWSTER, PAM
Address: 7598 PINEWALK DR S
City-St-Zip: MARGATE, FL 33063

Title: S ( ) Delete
Name: BREWSTER, PAM
Address: 7598 PINEWALK DR S
City-St-Zip: MARGATE, FL 33063

Title: T ( ) Delete
Name: BREWSTER, PAMELA
Address: 7598 PINEWALK DR. S
City-St-Zip: MARGATE, FL 33063

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: PAMELA BREWSTER P 03/21/2002
Electronic Signature of Signing Officer or Director Date