2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 05, 2001 8:00 am
Secretary of State
06-05-2001 90031 038 ***150.00

DOCUMENT # P98000046673

1. Entity Name

LICHTIGER CONSULTING, INC.

Principal Place of Business	Mailing Address
3475 SOUTH MOORING WAY COCONUT GROVE FL 33133	3475 SOUTH MOORING WAY COCONUT GROVE FL 33133-6517

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	c/o Pierce & Company, CPA 152 NE 167 Street
Suite, Apt. #, etc.	Suite, Apt. #, etc. #301
City & State	City & State North Miami Beach, Fl
Zip / Country	Zip 33162 / Country USA

4. FEI Number 65-0838896 — Applied For / Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PIERCE, CLIFFORD Y
1440 JOHN F. KENNEDY CSWY. #301
NORTH BAY VILLAGE FL 33141

7. Name and Address of New Registered Agent

Name: Monte Lichtiger
Street Address (P.O. Box Number is Not Acceptable): 3475 South Moorings Way
City: Coconut Grove FL Zip Code: 33133

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 [signature] 4-29-01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Date

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

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	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD LIGHTIGER, MONTE L 3475 SOUTH MOORING WAY COCONUT GROVE FL 33133	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[ ] Change [ ] Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	[ ] Change [ ] Addition

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

SIGNATURE: [signature] 4-29-01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)