

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P98000047074**

1. Entity Name

LANGUAGE RESOURCES INTERNATIONAL, INC.**FILED**
Jan 26, 2001 8:00 am
Secretary of State

01-26-2001 90049 003 ***150.00

704200



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
6853 SW 18 STREET SUITE 111 BOCA RATON FL 33433	6853 SW 18 STREET SUITE 111 BOCA RATON FL 33433

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
Zip	Country

4. FEI Number	65-0858226	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
COWDERY, WALTER I 6853 SW 18 STREET SUITE 111 BOCA RATON FL 33433

7. Name and Address of New Registered Agent
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 _____ (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) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD	TITLE	
NAME	COWDERY, WALTER I	NAME	
STREET ADDRESS	8440 NW 3RD STREET	STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	CITY-ST-ZIP	
TITLE	SD	TITLE	
NAME	COWDERY, MARIA C	NAME	
STREET ADDRESS	8440 NW 3RD STREET	STREET ADDRESS	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J.W. Cowdery W.I. COWDERY 01-15-2001 (561) 391-7779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #