

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000065216

FILED
Apr 23, 2002 8:00 AM
Secretary of State

Entity Name: ALLISON LEFCORT STUDIO, INC.

Current Principal Place of Business:

3100 NW BOCA RATON BLVD
SUITE 112
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

3100 NW BOCA RATON BLVD
SUITE 112
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-0852075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEFCORT, ALLISON
3100 NW BOCA RATON BLVD BAY #311
BOCA RATON, FL 33431

Name and Address of New Registered Agent:

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: _____

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: PSD () Delete
Name: LEFCORT, ALLISON
Address: 3100 NW BOCA RATON BLVD BAY #311
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: ALLISON LEFCORT

PRES

04/23/2002

Electronic Signature of Signing Officer or Director

_____ Date