

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State

09-11-2002 90122 030 ***550.00

DOCUMENT # P98000086362

1. Entity Name

E-VENTURE CAPITAL MANAGEMENT INC.

Principal Place of Business

1281 GULF OF MEXICO DR #1008
 LONG BOAT KEY FL 34224
 US

Mailing Address

1281 GULF OF MEXICO DR #1008
 LONG BOAT KEY FL 34224
 US

2. Principal Place of Business

3308 Sabal Cove Lane
 Suite, Apt. #, etc.

3. Mailing Address

3308 Sabal Cove Lane
 Suite, Apt. #, etc.

City & State

Longboat Key, FL

City & State

Longboat Key, FL

Zip

34228

Country

USA

Zip

34228

Country

USA

4. FEI Number

13-4026976

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

GALLUCCIO, VINCENT

1281 GULF OF MEXICO DR #1008
 LONG BOAT KEY FL 34224

7. Name and Address of New Registered Agent

Name

Galluccio, Vincent

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

3308 Sabal Cove Lane

City

Longboat Key

FL

Zip Code

34228

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Vincent A. Galluccio

9/6/02

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) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS GALLUCCHIO, VINCENT
 CITY-ST-ZIP 675 3RD AVENUE #2800
 NEW YORK NY 10017

TITLE ☐ Delete
 NAME T
 STREET ADDRESS GINSBERG, DANIEL
 CITY-ST-ZIP 675 3RD AVENUE #2800
 NEW YORK NY 10017

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
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 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:

Daniel J. Ginsberg
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)