

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000086436

FILED  
Sep 16, 2002  
Secretary of State

Entity Name: THE BRIDGEPORT ENERGY CORP.

## Current Principal Place of Business:

4649 PONCE DE LEON BLVD.  
STE. 307  
CORAL GABLES, FL 33146 US

## Current Mailing Address:

P.O. BOX 143639  
CORAL GABLES, FL 331143639 US

## New Principal Place of Business:

2520 SW 22ND STREET  
STE. 2-296  
MIAMI, FL 33145 US

## New Mailing Address:

2520 SW 22ND STREET  
STE. 2-296  
MIAMI, FL 33145 US

FEI Number: 65-0900348

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANCHEZ & ASSOCIATES, P.A.  
4211 N.W. 2ND TERRACE  
MIAMI, FL 33126 US

## 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: PD ( ) Delete  
Name: VAN VLIET, WILLIAM III  
Address: P.O. BOX 143639  
City-St-Zip: CORAL GABLES, FL 331143639 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition  
Name: SMITH, SHELBY A  
Address: 2520 SW 22ND STREET  
City-St-Zip: MIAMI, FL 33145 US

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: SHELBY A SMITH

D

09/16/2002

Electronic Signature of Signing Officer or Director

Date