

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000094187

FILED
Feb 18, 2002 8:00 AM
Secretary of State

Entity Name: ADVENTURE COMPUTERS, INC.

Current Principal Place of Business:

300 BISCAYNE BLVD. WAY
SUITE 917
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 113054
MIAMI, FL 331113054

New Mailing Address:

FEI Number: 65-0873967

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINS, JOAO T
300 BISCAYNE BLVD. WAY
SUITE 917
MIAMI, FL 33131 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: PST () Delete
Name: LINS, JOAO T
Address: 10200 S.W. 20TH STREET
City-St-Zip: MIAMI, FL 33165

Title: DT () Delete
Name: SERRADE, SANIOS
Address: 10200 SW 20TH STREET
City-St-Zip: MIAMI, FL 33165

Title: D () Delete
Name: HEARDON, ROBERT E
Address: PO BOX 113054
City-St-Zip: MIAMI, FL 331113054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change () Addition
Name: SERRADE, SANTOS
Address: 10200 SW 20TH STREET
City-St-Zip: MIAMI, FL 33165

Title: D (X) Change () Addition
Name: HEARDEN, ROBERT C
Address: PO BOX 113054
City-St-Zip: MIAMI, FL 331113054

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: JOAO T LINS

PST

02/18/2002

Electronic Signature of Signing Officer or Director

Date