2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000002878

Entity Name: DOT-CALM GROUP, INC.

WESTON, FL 33327

City-St-Zip:

FILED Apr 28, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
2581 MAYF WESTON,					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
2581 MAYF WESTON,					
FEI Number:	65-0922334	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
DAVIS, DANIEL 1313 PONCE DE LEON BLVD. SUITE 200 CORAL GABLES, FL 33134 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.				
SIGNATUR					
	Electron	c Signature of Registered Ager	TT .	Date	
•	_	satisfy its Intangible Tax filing requ Trust Fund Contribution ().	irement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () DAVIS, DAVE 13001 SW 15 C PEMBROKE PIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DAVIS, ALAN J 2581 MAYFAIR WESTON, FL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () DAVIS, DOROTH 13001 SW 15 C PEMBROKE PIN	T APT T-312	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () DAVIS, BARBAR 2581 MAYFAIR		Title: Name: Address:	() Change () Addition	

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.

City-St-Zip:

SIGNATURE: ALAN J. DAVIS D 04/28/2002