FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED May 14, 2002 8:00 am Secretary of State

DOCUMENT # P99000045705						05-14-2002 90069 002 ***150.00		
VANDERCLIFF INCORPORATED \								
	DO NOT WRITE	IN THIS	SPAC	E		65668	18	
Principal Place of Business 10091 GULF BLVD. Suite, Apt. #, etc.		3. Mailing Address C/o LOUIS L. WEINTRAUB Suite, Apt. #, etc.				Do not write in this	S SPACE	
City & Sta	ate SURE ISLAND, FL	PMB 243. 10 BENNING STREET City & State WEST LEBANON, NH				4. FEI Number Applied For 58-2484753 Not Applied le		
^{Zip} 33706	Country Zip C		Cour			5. Certificate of Status Desired \$8.75 Additional Fee Required		
	· · · · · · · · · · · · · · · · · · ·	1 00.01.0102		ì	7. Na	ame and Address of Current Registere		
	DITE	74 L 1 M	Name JO <u>.</u> CI	AIR	AIRE SPEAR, ESQUIRE			
DO NOT WRITE IN THIS SPACE				Street Address (P.O. Box Number is Not Acceptable) 9410 INTERNATIONAL COURT NORTH				
				City ST. PETE	ERSE	BURG FI	Zip Code 33716-4801	
8. The above	e named entity submits this statement fo	the purpose of changing	its registere	ed office or registe	ered ag	ent, or both, in the State of Florida.		
SIGNATURE	Signature, typyd or printed name of registered agent	un title if applicable. (N		RE SPEAR, ES		7/010/0	2	
9. This corporation is eligible to satisfy its Intangible **This corporation is eligible to satisfy its Intangible **After May 1. Fig. 1. Amended UB Make Check Payable to				s \$550.00 s \$61.25	ate	Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
11.	OFFICERS AND							
TITLE NAME	P, S, T, D LOUIS L. WEINTRAUB		TITLE NAME) I				
STREET ADDRESS CITY-ST-ZIP	PMB 243. 10 BENNING STREET WEST LEBANON, NH 03784-34			T ADDRESS ST-ZIP				
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CITY-ST-ZIP			- 1	ST-ZIP		· · · · · · · · · · · · · · · · · · ·		
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STREET ADDRESS. CITY-ST-ZIP	الرامي المداريق على العالم العالم	<u> </u>	_	T ADDRESS	<u> </u>	DO NOT WRI	TE	
TITLE			TITLE			IN THIS SPACE	- 12-	
NAME STREET ADDRESS			NAME SERFE	T ADDRESS		IIV I IIIO SPAI		
CITY-ST-ZIP				ST-ZIP				
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STREET ADDRESS			NAME STREE	T ADDRESS		•		
CITY-ST-ZIP			CITY-	ST-ZIP				
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STREET ADDRESS	•		NAME STREE	ADDRESS .				
CITY-ST-ZIP	portify that the information		спу-	, i				
indicated of the corpattachmen	eamy that the information supplied with on this report or supplemental report is poration or the receiver or trustree empont at with an address, with all other like em	inis filing does not qualify fure and accurate and that wered to execute this rep poylered.	or the exem my signatu ort as requ	nption stated in Se re shall have the ired by Chapter 6	ection 1 same le 07, Flor	19.07(3)(i). Florida Statutes, I further ceregal effect as if made under oath; that I aida Statutes; and that my name appear	tify that the information am an officer or director s in Block 11 or on an	