

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90135 047 ***150.00

DOCUMENT # P99000077693

1. Entity Name
THESCIENTIFICWORLD, INC.

Principal Place of Business
**1901 SOUTH CONGRESS AVE.
 SUITE 200
 BOYNTON BEACH FL 33426**

Mailing Address
**1901 SOUTH CONGRESS AVE.
 SUITE 270
 BOYNTON BEACH FL 33426**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 200

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0944355**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HILLIER, JEFFREY
 1901 SOUTH CONGRESS AVE.
 SUITE 200
 BOYNTON BEACH FL 33426**

Name

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

City

FL

Zip Code

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.

SIGNATURE

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/30/02

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 \$150.00
 After May 1, 2002 Fee will be \$550.00
 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	HILLIER, JEFFREY	
STREET ADDRESS	1903 S. CONGRESS AVE. SUITE 200	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE	D	<input type="checkbox"/> Delete
NAME	TOMLINSON, ERIC	
STREET ADDRESS	1903 S. CONGRESS AVE. SUITE 200	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE	T	<input type="checkbox"/> Delete
NAME	HILLIER, JEFFREY	
STREET ADDRESS	1903 S CONGRESS AVENUE, #200	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE	CEOS	<input type="checkbox"/> Delete
NAME	TOMLINSON, ERIC	
STREET ADDRESS	1903 S CONGRESS AVENUE, #200	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE	D	<input type="checkbox"/> Delete
NAME	DELLA PENTA, DAVID	
STREET ADDRESS	1903 S CONGRESS AVENUE, #200	
CITY-ST-ZIP	BOYNTON BEACH FL 33426	
TITLE	D	<input type="checkbox"/> Delete
NAME	LUBIN, DANIEL	
STREET ADDRESS	ONE ROCKEFELLER PLAZA, #920	
CITY-ST-ZIP	NEW YORK NY 10020	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/02

Date

561-742-0068

Daytime Phone #

CR2E034 (9/01)