2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000090773

Entity Name: AUSLAND INC.

FILED Jan 09, 2002 8:00 AM Secretary of State

| Current Principal Place of Business: | | | New Principal Place of Business: | | |
|---|--|---|---|--|--|
| 527 BAY L KEY BISC | ANE AYNE, FL 331 | 49 | | | |
| Current Mailing Address: | | | New Mailing Address: | | |
| PO BOX 4 KEY BISC | 190315 AYNE, FL 331 | 49 | | | |
| FEI Number | : 65-0963587 | FEI Number Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and | d Address of (| Current Registered Agent: | Name and Address of | New Registered Agent: | |
| 2655 LEJE PENTHOL | CE J. MULLIN, EUNE ROAD JSE II ABLES, FL 33 | | | | |
| | e named entity e of Florida. | submits this statement for the p | ourpose of changing its registered | office or registered agent, or both, | |
| SIGNATU | RE: | | | | |
| Electronic Signature of Registered Age | | | ent | Date | |
| | | o satisfy its Intangible Tax filing red g Trust Fund Contribution(). | quirement and elects to do so (X). | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | D (DE CASABIANO 104 CRANDON KEY BISCAYN | BLVD. #315 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (LIEVANO, ISAE 104 CRANDON KEY BISCAYN | I BLVD. #315 | Title: Name: Address: City-St-Zip: | () Change () Addition | |
| Title: Name: Address: City-St-Zip: | D (OROZCO, GIN 104 CRANDON KEY BISCAYN | BLVD. #315 | Title: Name: Address: City-St-Zip: | () 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.

SIGNATURE: GINETTE DE CASABIANCA D 01/09/2002