

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000098551

FILED  
Mar 15, 2002 8:00 AM  
Secretary of State

Entity Name: SHUKY LASER PRODUCTS CORP.

**Current Principal Place of Business:**

3571 N DIXIE HWY  
OAKLAND PARK, FL 33334

**New Principal Place of Business:**

3837 N ANDREWS AVE  
OAKLAND PARK, FL 33309

**Current Mailing Address:**

3571 N DIXIE HWY  
OAKLAND PARK, FL 33334

**New Mailing Address:**

3837 N ANDREWS AVE  
OAKLAND PARK, FL 33309

FEI Number: 65-0955717

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GIVEON, JOSHUA  
3571 N DIXIE HWY  
OAKLAND PARK, FL 33334

**Name and Address of New Registered Agent:**

GIVEON, JOSHUA  
3837 N ANDREWS AVE  
OAKLAND PARK, FL 33309

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

03/15/2002

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: D ( ) Delete  
Name: GIVEON, JOSHUA  
Address: 3571 N DIXIE HWY  
City-St-Zip: OAKLAND PARK, FL 33334

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: GIVEON, JOSHUA  
Address: 3837 N ANDREWS AVE  
City-St-Zip: OAKLAND PARK, FL 33309

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: GIVEON JOSHUA

Electronic Signature of Signing Officer or Director

MR

03/15/2002

Date