AMENDED **2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # S20325

1. Entity Name
STAMEY SYSTEMS, INC.

FILED
03 NOV -7 PM 12:11
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business	Mailing Address
7350 102ND PLACE S BOYNTON BEACH, FL 33437 US	1100 S FEDERAL HWY SUITE 4 BOYNTON BEACH, FL 33435 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
17170 Whitehaven Drive	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Boca Raton, FL	City & State
Zip: 33496 Country: US	Zip Country

4. FEI Number: 65-0232525 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STAMEY, E T 7350 102ND PL S BOYNTON BEACH, FL 33437	Name: Clifford I. Hertz, P.A. Street Address (P.O. Box Number is Not Acceptable): One North Clematis Street Suite 500 City: West Palm Beach FL Zip Code: 33401

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ 10/31/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating) DATE

Clifford I. Hertz, Pres.

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee Will Be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD STAMEY, E T 7350 102ND PL S BOYNTON BCH, FL	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/S/T/D LEGUM, WENDY 17170 Whitehaven Drive Boca Raton, FL 33496	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS STAMEY, MARLIN 7350 102ND PL S BOYNTON BCH, FL	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	500024509845 11/07/03--01055--004 **51.25	☐ Change ☐ Addition
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CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wendy Legum, President 10/31/03 561-737-2776

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Wendy Legum, Pres.