2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V39993

FILED Apr 29, 2003 Secretary of State

Entity Name: J.S.L. ENTERPRISES OF ORLANDO, INC.

Current Principal Place of Business:		New Principal Place of Business:				
180 PARK SUITE 142 OVIEDO, F	i	US				
Current Mailing Address:		New Mailing Address:				
180 PARK SUITE 142		II.O				
OVIEDO, F		US	FFI North on Not America	liantela ()	Cardifficate of Ctatus Basiness	17.
FEI NUMBER	59-3121002	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired	1()
Name and	Address of	Current Registered Agent:	Name and	Address of N	lew Registered Agent:	
LOVELL, S 180 PARK SUITE 142	ROAD					
OVIEDO, F	FL 32765 U					
OVIEDO, f The above	FL 32765 U	S y submits this statement for the	purpose of changing	its registered o	office or registered agent, o	or both,
OVIEDO, f The above	FL 32765 U named entit of Florida.		purpose of changing	its registered o	office or registered agent, o	or both,
OVIEDO, F The above in the State	FL 32765 U named entit e of Florida. RE:			its registered o	office or registered agent, o	or both,
OVIEDO, F The above in the State SIGNATUI	ramed entite of Florida. RE: Electr	y submits this statement for the onic Signature of Registered Ag		its registered o		or both,
OVIEDO, F The above in the State SIGNATUI	ramed entite of Florida. RE: Electr	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution ().	gent			
OVIEDO, F The above in the State SIGNATUE Election Car OFFICER Title: Name: Address:	named entite of Florida. RE: Electronpaign Finance S AND DIRE PD LOVELL, STI	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). CCTORS: () Delete EVE DAD, SUITE 142	gent	IS/CHANGES	Date	
OVIEDO, F The above in the State SIGNATUI	named entite of Florida. RE: Electr Inpaign Finance S AND DIRE PD LOVELL, STI 180 PARK RI OVIEDO, FL	y submits this statement for the onic Signature of Registered Aging Trust Fund Contribution (). (CTORS: () Delete EVE DAD, SUITE 142 32765 () Delete ERY D #142	ADDITION Title: Name: Address:	IS/CHANGES	Date TO OFFICERS AND DIR Change () Addition Change () Addition 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: HARRY WALTZ VP 04/29/2003