## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V69871

Entity Name: PROFESSIONAL LASER CENTER, INC.

FILED Jan 06, 2003 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business:   |
|--------------------------------------|------------------------------------|
| Current Finicipal Flace of Business. | New Fillicipal Flace of Busiliess. |

6360 SW 41ST PLACE DAVIE, FL 33314

Current Mailing Address: New Mailing Address:

950 N. FEDERAL HWY. 6360 SW ,41ST PLACE SUITE 109 DAVIE, FL 33314 POMPANO BEACH, FL 33062

FEI Number: 65-0375372 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

EDWARDS, GEORGE E.
950 N. FEDERAL HIGHWAY, #219
POMPANO BEACH, FL 33062

EDWARDS, GEORGE E.
950 N. FEDERAL HIGHWAY, #109
POMPANO BEACH, FL 33062

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: 01/06/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

 Title:
 PDS
 ( ) Delete

 Name:
 BRESKY, ROY H

 Address:
 4050 NE 25TH AVENUE

City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: ( ) Delete

Name:
Address:
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change ( ) Addition

Name: BRESKY, ROY H
Address: 7379 SEDONA WAY
City-St-Zip: DELRAY BEACH, FL 33446

Title: VPD ( ) Change (X) Addition

Name: BRESKY, ANDREA F Address: 7379 SEDONA WAY City-St-Zip: DELRAY BEACH, FL 33446

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: ROY H BRESKY DPS 01/06/2003