

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000064817

1. Entity Name
ECS OF UTAH, INC.

FILED

02 JUN 19 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1001 NES DAIRY RD. SUITE 208
N MIAMI BEACH FL 33180

Mailing Address
1001 NES DAIRY RD. SUITE 208
N MIAMI BEACH FL 33180



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number 65-1020305
Applied For Not Applicable

5. Certificate of Status Desired [] \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SCHILLINGER, JEFFREY P
1001 NES DAIRY RD, SUITE 208
N MIAMI BEACH FL 33180

7. Name and Address of New Registered Agent
Name ~~CF-Corporation-System~~
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
City Plantation FL Zip Code 33224

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. []

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. [] \$5.00 May Be Added to Fees

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. Rows include VTD SCHILLINGER, JEFFREY and PSD SCHILLINGER, DAVID.

Table with 2 columns: Title, Name, Street Address, City-ST-ZIP. For additions/changes to officers and directors.

CR2E034 (9/01)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey P Schillinger

Date: 2/10/02

Daytime Phone # _____