

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 518992

FILED
Jan 29, 2002 8:00 AM
Secretary of State

Entity Name: MFZ MANAGEMENT CORPORATION

Current Principal Place of Business:

2305 NW 107TH AVENUE
MIAMI, FL 33172

Current Mailing Address:

2305 NW 107TH AVENUE
MIAMI, FL 33172

New Principal Place of Business:

1550 MADRUGA AVENUE
SUITE 406
CORAL GABLES, FL 33146

New Mailing Address:

1550 MADRUGA AVENUE
SUITE 406
CORAL GABLES, FL 33146

FEI Number: 59-1707550

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEIVA, MARIA CAMILA
2305 NW 107TH AVENUE
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

LEIVA, MARIA CAMILA MRS.
1550 MADRUGA AVENUE
SUITE 406
CORAL GABLES, FL 33146 US

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: MARIA CAMILA LEIVA

01/29/2002

Electronic Signature of Registered Agent

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: HOYOS, BEATRIZ
Address: 2305 NW 107 AVE
City-St-Zip: MIAMI, FL

Title: PD () Delete
Name: LEIVA, GERMAN,
Address: 2305 NW 107TH AVE
City-St-Zip: MIAMI, FL 0,

Title: STD () Delete
Name: LEIVA, MARIA C,
Address: 2305 NW 107TH AVE
City-St-Zip: MIAMI, FL 0,

Title: V () Delete
Name: FREED, OWEN S.,
Address: 2305 NW 107TH AVE.
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOYOS, BEATRIZ MRS.
Address: 1550 MADRUGA AVENUE SUITE 406
City-St-Zip: CORAL GABLES, FL 33146

Title: PD (X) Change () Addition
Name: LEIVA, GERMAN MR.
Address: 1550 MADRUGA AVENUE SUITE 406
City-St-Zip: MIAMI, FL 33146

Title: STD (X) Change () Addition
Name: LEIVA, MARIA CAMILA MRS.
Address: 1550 MADRUGA AVENUE SUITE 406
City-St-Zip: CORAL GABLES, FL 33146

Title: V (X) Change () Addition
Name: FREED, OWEN S MR.
Address: 1550 MADRUGA AVENUE SUITE 406
City-St-Zip: CORAL GABLES, FL 33146

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: MARIA CAMILA LEIVA

D

01/29/2002

Electronic Signature of Signing Officer or Director

Date