2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

694953

1. Entity Name



FILED May 19, 2003 8:00 am Secretary of State

05-19-2003 90222 005 ***150.00

THAVEL DEPOT, INC.											
11880 BIRD RI SUITE 114 MIAMI FL 3317 US	75	Mailing Address 11880 BIRD ROAD SUITE 114 MIAMI FL 33175 US									
2. Principal P	Place of Business	3. Mailing Address					I (BOISE BILLO IBILI BIBIN IBIDI GILDE)	III 618 11 0101	, 31811 E1241 E1	IBII EIBII IBBI	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				1	CHECK HERE IF	MAKING (CHANGES		
City & Stat	e	City & State				4. [FEI Number 59-2111669		 -	oplied For ot Applicable	
Zip	Country	Zip Count			try	5. Certificate of Status Desired \$8.75 Additional Fee Required					
						71	Name and Address of New Reg	stered Aç	jent		
					Name						
· ·	IARIA MANGAS				Street Address (Street Address (P.O. Box Number is Not Acceptable)					
10522 SW	•				`			 _			
MIAMI FL 33186					}					1	
	' :			į	City			FL	Zip Code	e	
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.											
CICANATURE											
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Finan- Trust Fund Contribution.	cing		May Be to Fees	
10.	OFFICERS AND					ΑD	L DDITIONS/CHANGES TO OFFICE	RS AND E	NRECTORS	S IN 11	
	PM	311 12 G 1 G 1 G	☐ Delete	TITLE			STREET, STATE OF THE		☐ Change	Addition	
	MANGAS NUNEZ, MARIA		22 5000	NAME				•			
STREET ADDRESS	10522 SW 145 COURT		ı		ET ADDRESS					}	
	MIAMI FL 33186			CITY	-ST-ZIP						
TITLE	VD Nunez, modesto		☐ Delete	TITLE	ſ			I	☐ Change	☐ Addition	
NAME STREET ADDRESS	10522 SW 145 COURT			NAME	ET ADDRESS					1	
	MIAMI FL 33186				-ST-ZIP						
TITLE	S		☐ Delete	TITLE		-	7.2		Change	Addition	
	NUNEZ, LOURDES			NAME	E					_	
	9347 SW 145 PLACE				ET ADDRESS						
	MIAMI FL 33186			-	-ST-ZIP						
TITLE NAME	NAVARRO, LOURDES M		☐ Delete	TITLE NAME	,			ŀ	Change	Addition	
	55 SAMANA DR		II		ET ADDRESS					1	
	COCONUT GROVE FL 33133			CITY-	-ST-ZIP					(
TITLE	D		Delete	TITLE	:			[Change	Addition	
	BEIRO, TERESITA			NAME							
	10223 SW 17 ST. MIAMI FL 33165				ET ADDRESS					}	
CITY-ST-ZIP	MIAMI FL 33163				-ST-ZIP				The Charter	The state of the s	
titlé Name			☐ Delete	TITLE NAME				l.	Change	Addition	
STREET ADDRESS	,	T.	ļ		ET ADDRESS					{	
CITY-ST-ZIP					-ST-ZIP						
12 I hereby o	ertify that the information supplied with t	thie filing do	oe not qualify for th	0.070	mation stated in So	otion :	110 07(2)(i) Florido Statutos Utili	thor cortif	that the is	nformation	

indicated on this report or supplied with this filling does not quality 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 frue 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 truther improvement 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 a paid of the corporation of the corporation of the receiver of truther into the receiver of the corporation of the corporation of the corporation of the receiver of truther into the receiver of the corporation of the receiver of truther into the receiver of the receiver of the receiver of truther into the receiver of th

SIGNATURE:

KOUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR