

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # G50953

1. Entity Name

De La Fuente Party Rental, Inc.

02 NOV -5 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1760 Northwest 22nd. Street
Suite, Apt. #, etc.

3. Mailing Address
1760 Northwest 22nd. Street
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
59-2322978

Applied For
Not Applicable

Zip
33142 Country
US

Zip
33142 Country
US

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Eduardo de la Fuente

Street Address (P.O. Box Number is Not Acceptable)

4925 Southwest 88th. Court

City Miami FL Zip Code 33165

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME **DPS** Eduardo de la Fuente
STREET ADDRESS 4925 Southwest 88th. Court
CITY-ST-ZIP Miami, Florida 33165

TITLE NAME
STREET ADDRESS 600008815696
CITY-ST-ZIP 11/05/02--01113--004 **150.00

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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 on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-24-02

Date

Daytime Phone #

CR2E034B (12/01)

[Handwritten initials]

Carlos Valera & Associates, Inc.

Division of Corporations
Annual Report/Reinstatement Section
Tallahassee, Florida 32314-6327

October 24, 2002

RE: De la Fuente Party Rental, Inc.
G50953 -- EIN: 59-2322978

To Whom It May Concern:

Enclosed please UBR and check in the amount of \$150.00 for year 2002. Please note that original report was never received due to address change and mail not being forwarded correctly. If corporation has been dissolved please reinstate as this situation is beyond our control.

If you require additional information please contact me at 305 448-4005 ext 104.

Cordially,

Jose Valera

Jose Valera
Accountant for:
De la Fuente Party Rental, Inc.