

04-21-2003 90373 029 \*\*\*\*70.00

**2003 NOT-FOR-PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **N92000000063**  
 1. Entity Name  
**AMIGOS TOGETHER FOR KIDS, INC.**



55044746



CHECK HERE IF MAKING CHANGES

Principal Place of Business  
**801 S.W. 3rd Avenue  
 Suite 303  
 Miami, FL 33130**

Mailing Address  
**801 S.W. 3rd Avenue  
 Suite 303  
 Miami, FL 33130**

2. Principal Place of Business  
**801 S.W. 3 Ave  
 Suite, Apt. #, etc.  
 Suite # 303  
 City & State  
 Mia. Fl.**

3. Mailing Address  
**801 S.W. 3 Ave.  
 Suite, Apt. #, etc.  
 Suite # 303  
 City & State  
 Mia. Fl.**

4. FEI Number **65-0361629** Applied For  
 Not Applicable

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

Zip **33130** Country **USA** Zip **33130** Country **USA**

6. Name and Address of Current Registered Agent  
**CRUZ, CELIA M  
 815 PONCE DE LEON BLVD  
 STE 200  
 MIAMI FL 33134**

7. Name and Address of New Registered Agent  
 Name **Marisela Guedes**  
 Street Address (P.O. Box Number is Not Acceptable)  
**801 S.W. 3 AVE  
 Suite #303  
 City Mia. Fl. FL Zip Code 33130**

I, the above named entity, submit 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.

SIGNATURE *[Signature]* DATE **April 16 03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

FILE NOW: FEE IS \$61.25

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR PLASENCIA, JORGE -D 800 DOUGLAS RD ANNEX BLDG STE 111 CORAL GABLES FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	R RODRIGUEZ, DANIA M -D 2475 PONCE DE LEON BLVD PH CORAL GABLES FL 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR CUESTA, ERNESTO -T 1550 BRICKELL AVE STE 108A MIAMI FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ECHERARRIA, ZUZEH -D 12680 SW 38 TERRACE MIAMI FL 33176	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fernandez, Roxana -D 2000 Ponce De Leon Blvd. P.H. Coral Gables, Fl. 33134	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Rodriguez, Dania M. 2475 Brickell Ave. Apt. 1203 Miami, Fl. 33134 Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Trustee Cuesta, Ernesto 2475 Brickell Ave Apt 1203 mia. Fl. 33134 Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, title or other like empowered.

SIGNATURE *[Signature]* DATE **4/16/03** (305) 271-1155

SIGNATURE AND TITLE OR PRINTED NAME OF BRANCH OFFICER OR DIRECTOR

CPREC037 (10/02)