2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2001 8:00 am
Secretary of State
05-12-2001 90044 041 ***150.00

DOCUMENT # P00000002325

1. Entity Name
DELROS, INC.

Principal Place of Business	Mailing Address
6850 CORAL WAY SUITE 203 MIAMI FL 33155	6850 CORAL WAY SUITE 203 MIAMI FL 33155

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
6850 Coral Way	P.O. Box 940458
Suite, Apt. #, etc.: 203	Suite, Apt. #, etc.:
City & State: Miami Fl	City & State: Miami Fl
Zip: 33155 Country: U.S.A.	Zip: 33194 Country: U.S.A

4. FEI Number: 650971714 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROS, VILMA R
6850 CORAL WAY
SUITE 203
MIAMI FL 33155

7. Name and Address of New Registered Agent

Name: Luis Del Valle
Street Address (P.O. Box Number is Not Acceptable): 6850 Coral Way Suite 203
City: Miami Fl FL Zip Code: 33155

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: Luis Del Valle [signature] 3-20/01
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) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 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

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEL VALLE, LUIS 6850 CORAL WAY MIAMI FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROS, VILMA R 6850 CORAL WAY MIAMI FL 33155	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/00)

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: Luis Del Valle [signature] 3-20/01 3052766824
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #