

2001 UNIFORM BUSINESS REPORT (UBR)

192

FILED
01 NOV 13 AM 10:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000006961

1. Entity Name
Torices Corp.

Principal Place of Business Mailing Address

2. Principal Place of Business 5001 S. University Dr.
Suite, Apt. #, etc. #A

3. Mailing Address 5001 S. University Dr.
Suite, Apt. #, etc. #A

City & State Davie FL
Zip 33328 Country

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Zip 33328 Country

4. FEI Number Applied For Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
Sala, A. Rosemary
260 Crandon Blvd. #14
Key Biscayne, FL 33149

7. Name and Address of New Registered Agent
Name **Carlos Ochoa**
Street Address (P.O. Box Number is Not Acceptable)
5001 S University Dr. #A
City **Davie** FL Zip Code **33328**

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]* DATE **11/8/01**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

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

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

11. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	Carlos Ochoa
STREET ADDRESS	5001 S. University Dr. #A
CITY-ST-ZIP	Davie, FL 33328
TITLE	<input type="checkbox"/> Delete
NAME	Ochoa, Arubel H.
STREET ADDRESS	5001 S. University Dr. #A
CITY-ST-ZIP	Davie, FL 33328
TITLE	<input type="checkbox"/> Delete
NAME	Ochoa, Cheryl Cecilia O
STREET ADDRESS	5001 S University Dr. #A
CITY-ST-ZIP	Davie, FL 33328
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: *[Signature]* DATE **11/8/01**

CR2E034 (11/00)

SP

MARK A. BERNSTEIN, C.P.A., P.A.

2972

November 8, 2001

Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

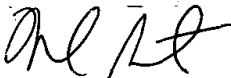
Re: Baru Corp
Document#P0000006701
Form: UBR
Year: 2000

Torices Corp
Document #P0000006961
Form: UBR
Year: 2000

Dear Sir or Madam:

Please be advised that upon checking my client's records, we noticed that his two companies, Baru Corp and Torices Corp are inactive due to the nonfiling of his annual report. The attorneys, who are no longer providing services for my client, had the annual reports sent to their place of business, but did not forward them to my client's attention. As you would notice we have changed the address so that all future correspondence is delivered to my office, so that I can make sure the all filing requirements are handled timely. Unfortunately, because they were not sent to my client, they were not handled timely. We are asking that you abate all penalties, as my client, had no intention not to pay the annual report fee. We have enclosed checks, each for one hundred fifty dollars (\$150.00) to cover the cost of the annual reports for Baru Corp and Torices Corp. We thank you in advance for your cooperation and understanding in this matter.

Sincerely,



Mark Bernstein, CPA, PFS

MB:ms

Cc: Mr. Carlos Ochoa

Encl. - 2 Annual Reports (Baru Corp and Torices Corp)
Check#1001 for Torices Corp
Check#1006 for Baru Corp