## 2002 UNIFORM BUSINESS REPORT (UBR)

of the corporation or the receiver or tru changed, or on an attachment with a

SIGNATURE

## Jul 10, 2002 8:00 am Secretary of State DOCUMENT # P00000070920 1. Entity Name 07-10-2002 90196 018 \*\*\*550.00 ZULETA PROPERTIES, INC. Principal Place of Business Mailing Address R0128488 7310 SW 78TH COURT 7310 SW 78TH COURT MIAMI FL 33143 MIAMI FL 33143 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number NOT APPLICABLE Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SHAW, RICHARD L Street Address (P.O. Box Number is Not Acceptable) 2511-PONCE: DE-LEON: BLVD-SUITE 209 Zip Code CORAL GABLES FL 33134 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After September 13, 2002 Fee will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Delete TITLE PD STEPHEN MEILVAIN AMB128, 5783 SW407,51 NAME SHAW, RICHARD L STREET ADDRESS STREET ADDRESS 7310 SW 78TH COURT NIAMI, FL 33155 CITY-ST-ZIP CITY-ST-ZIF **MIAMI FL 33143** ☐ Addition ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition Delete INTLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE TITLE □ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing closs 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, eport 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

7 July 0 2 3055623909

Date Dayline Phone #

CR2E034 (4/02

**FILED**