

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90758 001 ***150.00

**2002 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P0000082751
 1. Entity Name
OSTERIA DAL MORO CORPORATION

DO NOT WRITE IN THIS SPACE

828600

2. Principal Place of Business
9483 NW 49th Doral Lane
 Suite, Apt. #, etc.

3. Mailing Address
9483 NW 49th Doral Lane
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, Florida

City & State
Miami, Florida

4. FEI Number
59-3668504

Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

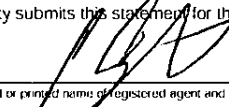
7. Name and Address of Current Registered Agent

Name
SAMLUT, Rafael E.

Street Address (P.O. Box Number is Not Acceptable)
9483 NW 49th Doral Lane

City
Miami FL Zip Code
33178

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  (NOTE: Registered Agent signature required when reinstating)

DATE **4/3/02**

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. **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 STREET ADDRESS CITY-ST-ZIP	PTD SAMLUT, Rafael E 9483 NW 49th Doral Lane Miami, FL 33178	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

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 employment.

SIGNATURE:  **4/3/2002** **305-461-9578**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #