

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 25, 2002 8:00 am
Secretary of State

02-25-2002 90025 031 ***150.00

DOCUMENT # P00000093238

1. Entity Name
VERTICAL SOURCE PHARMA INC.

Principal Place of Business
141 NE 3RD AVENUE
SUITE 300
MIAMI FL 33132

Mailing Address
141 NE 3RD AVENUE
SUITE 300
MIAMI FL 33132



2. Principal Place of Business
8900 SW 107 AVE
 Suite, Apt. #, etc.
317

3. Mailing Address
8900 SW 107 AVE
 Suite, Apt. #, etc.
317

DO NOT WRITE IN THIS SPACE

City & State
MIAMI FL

City & State
MIAMI FL

4. FEI Number **65-1045577**

Applied For
 Not Applicable

Zip
33176

Country
USA

Zip
33176

Country
USA

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

6. Name and Address of Current Registered Agent

CABEZA, MANUEL E
338 MINORCA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name
International Registered Agents Corporation
 Street Address (P.O. Box Number is Not Acceptable)
338 Minorca Avenue
 City
Coral Gables FL Zip Code
33134

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 **Maria Elena Cabeza, President**

DATE **2/11/02**

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, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIMA, CORI 141 NE 3RD AVENUE SUITE 300 MIAMI FL 33132	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lima, Cori 8900 SW 107 Avenue #317 miami, FL 33176	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 REQUIRED Cori Lima**

Date **2/6/02**

Daytime Phone # **(305) 596-0360**

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

*albert
Dw.*

CABEZA & ASSOCIATES, P.A.
ATTORNEYS AND COUNSELORS AT LAW

P00000093238

415570

February 12, 2002

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, Florida 32302-1500

RE: Our File Number.: 1460-01-MEC
Corporation: Vertical Source Pharma Inc.
Document Number.: P00000093238

Dear Sir or Madam:

Enclosed is the 2002 Uniform Business Report of Vertical Source Pharma. along with a check in the amount of \$150.00, to cover the filing fee for the annual report.

If you have any questions regarding this filing, please call our office.

Sincerely,



Maria Elena Cabeza
Paralegal

Enclosures