FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
03 OCT 21 AM 8:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000017842

1. Entity Name

ALBO BROKERAGE, INC.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03
DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2503 SW 9 AVE	P.O. BOX 4105
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33129 Country:	Zip: 33145 Country: USA

4. FEI Number 65-1075551 ☐ 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: REYES HERNANDEZ, MANUEL

Street Address (P.O. Box Number is Not Acceptable)

2503 SW 9 AVE 000022921070 10/21/03--01071--004 **158.75

City: MIAMI FL Zip Code: 33129

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 _____ 10-17-03
Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DA REYES HERNANDEZ, MANUEL 2503 SW 9 AVE MIAMI FL 33129	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/02)

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: Manuel Reyes Hernandez 10-17-03 305-776-9478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

10/23

JN
Accounting & Tax Service, Inc.

October 17, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Albo Brokerage, Inc.
Document no. **P01000017842**
2003 Annual-Uniform Business Report

Dear Sir or Madam:

Enclosed please find:

1) Original Corporation Reinstatement Report
2) A check payable to the Department of State in the amount of $158.75

We are respectfully requesting abatement of the penalties since the above corporation had move from the previous address (28 N.E. 29th Street, Miami, FL 33137) and when it was time to file the report again it did not received the forms.

Please review the above circumstances and abate the penalty of the reinstatement fee as Mr. Hernandez acted in good faith to try and comply with the law and he has made a commitment to make the payment of renewal timely now and in the future.

We have thank you in advance for your cooperation in this matter and ask, if you need additional information do not hesitate to call or contact us at your earliest convenience.

Sincerely,

Jose A. Torres
Accountant

Manuel Reyes Hernandez
President

10305 NW 41 Street, Suite 116 • Miami, FL 33178 • Phone: (305) 477-2609 • Fax: (305) 477-2638 • E-Mail: injnamen@aol.com