

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000031404

FILED  
Apr 24, 2002 8:00 AM  
Secretary of State

Entity Name: EL STUDIO, INC.

**Current Principal Place of Business:**

C/O ROBERT COULTAS  
3670 PALMETTO AVENUE  
MIAMI, FL 33133

**New Principal Place of Business:**

518 GULFAIRE DRIVE  
PORT ST JOE, FL 32456

**Current Mailing Address:**

C/O ROBERT COULTAS  
3670 PALMETTO AVENUE  
MIAMI, FL 33133

**New Mailing Address:**

518 GULFAIRE DRIVE  
PORT ST JOE, FL 32456

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

AMERICAN INFORMATION SERVICES, INC.  
ONE SOUTHEAST THIRD AVENUE  
28TH FLOOR  
MIAMI, FL 33131 US

**Name and Address of New Registered Agent:**

DUARTE, ELISEO D DUARTE  
518 GULFAIRE  
PORT ST JOE, FL 32456 US

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: ELISEO DAVID DUARTE 04/24/2002  
Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: MR. ( ) Change (X) Addition  
Name: DUARTE, ELISEO D PRESIDE  
Address: 518 GULFAIRE DRIVE  
City-St-Zip: PORT ST JOE, FL 32456

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISEO DAVID DUARTE MR. 04/24/2002  
Electronic Signature of Signing Officer or Director Date