

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

**FILED**  
**May 27, 2002 8:00 am**  
**Secretary of State**

05-27-2002 90415 018 \*\*\*150.00

DOCUMENT # P01000082852  
1. Entity Name  
MARIANA RODRIGUEZ ENTERPRISES, INC. ✓

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
9301 SW 59 ST.  
Suite, Apt. #, etc.  
Miami, Fl. 33173  
City & State

3. Mailing Address  
9301 SW 59 ST.  
Suite, Apt. #, etc.  
Miami, Fl. 33173  
City & State

DO NOT WRITE IN THIS SPACE

4. FEJ Number  
65-1132247 Applied For  Not Applicable

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

Zip Country Zip Country  
USA

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name MARIANA RODRIGUEZ  
Street Address (P.O. Box Number is Not Acceptable)  
9301 SW 59 ST.  
City Miami FL Zip Code 33173

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**

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)

**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 President  
NAME MARIANA RODRIGUEZ  
STREET ADDRESS 9301 SW 59 ST.  
CITY - ST - ZIP Miami, Fl. 33173

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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 in an attachment with an address, with all other like empowered.

SIGNATURE MARIANA RODRIGUEZ Date April 20, 2002 Daytime Phone # 598-7279  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034B (12/01)