UNIF	OR PROFIL	IESS REPOR	T (UBR)	Jun 02, 2003		
1. Entity Name	T# 701000 Liborio,			Secretary of 06-02-2003 90198 030		
DO	NOT WRIT	E IN THIS S	SPACE			
2. Principal Place of Business 8240 E. Causeway Blvd. Suite, Apt. #, etc.		3. Mailing Address 8240 E. Causeway Blvd. Suite, Apt. #, etc.		DO NOT WRITE IN THIS SI	PACE	
City & State TAMPA, F1.		City & State TAMPA, F1.		4. FEI Number 59 - 3744864	Applied For Not Applicable	
33419	Country U.S.A	33419	Country U.S. A	5. Certificate of Status Desired	8.75 Additional	
<u> </u>		19		7. Name and Address of Current Registered		
			Name			
DO NOT WRITE			Street Address	Street Address (P.O. Box Number is Not Acceptable)		
	IN THIS S	PACE				
			City		Zin Code	
			City	FL	Zip Code	
 The above named entire obligations of reg 		t for the purpose of changing	its registered office or registe	red agent, or both, in the State of Florida. I am far	miliar with, and accept	
SIGNATURE VOXO	ped or printed name of redistered ag	A Veronic	PA LIMA NOTE: Registered Agent signature require	5-27-03		
After Ma Amend	May 1 Fee is \$150.00 ay 1, Fee is \$550.00 led UBR is \$61.25 to Florida Department	of State		9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10.	OFFICERS AI	ND DIRECTORS				
	Roser		TITLE			
NAME Lima, Roger STREET ADDRESS 7518 Tidewater Trail			STREET ADDRESS			
CITY-ST-ZIP Tampp, Fl. 33419			CITY ST-ZIP			
TITLE VP	Vermin		TITLE NAME	is the expression of the state		
STREET ADDRESS 7518	Tidewater T	Rail	STREET ADDRESS			
CITY-ST-ZIP Tam	L, Veronica Tidewater T IPA, Fl. 3361	9	CITY-ST-ZIP			
TITLE	` ,		TITLE			
NAME STREET ADDRESS			NAME STREET ADDRESS			
CITY-ST-ZIP			CITY-ST-ZIP	DO NOT WRIT		
TITLE			TIFLE	IN THIS SPAC	F	
NAME STREET ADDRESS			NAME STREET ADDRESS		Common analysis of the second second second	
CITY-ST-ZIP			CITY-ST-ZIP	and the second s		
TITLE			TITLE	The contraction of the contracti		
NAME			NAME			
STREET ADDRESS CITY-ST-ZIP			STREET AODRESS CITY ST-ZIP			

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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Yelouca

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Veronica Lima

5/27/03 8/3-623-/3/8 Date Daylime Phone #

Affachment To Whom It May Concein: I have sent the Uniform Business Report for Tio Liborio Suc. late, because it rever recieved the this letter explaining my t me, and that my company will not be peralezed. Please note the charge