


2003

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

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-24-2003 90185 008 ***150.00

DOCUMENT # P02000001055 1. Entity Name PROLAC SERVICES CORPORATION	
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DO NOT WRITE IN THIS SPACE

90058543

2. Principal Place of Business 801 W 26 AVENUE Suite, Apt. #, etc. SUITE 4 City & State HIALEAH Zip 33016	Country MIAMI-DADE	3. Mailing Address 801 SW 26 AVENUE Suite, Apt. #, etc. SUITE 4 City & State HIALEAH Zip 33016	Country MIAMI-DADE
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DO NOT WRITE IN THIS SPACE

4. FEI Number 75-3003463	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name MARIO PEREZ-ARCHE	
Street Address (P.O. Box Number is Not Acceptable) 807 SW 25 AVENUE SUITE 201	
City MIAMI	FL Zip Code 33135

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 *Mario Perez-Arche* 1/30/03

Signature (Type or printed name of registered agent, 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. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/PRESIDENT - ALFREDO LEONARDO ROA - 2011 RENAISSANCE BLVD #305 MIRAMAR, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/VICE-PRESIDENT MARI VALENCIA - 2011 RENAISSANCE BLVD #305 MIRAMAR, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/TREASURER ALFREDO ROA - 2011 RENAISSANCE BLVD #305 MIRAMAR, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR/SECRETARY ALFREDO LEONARDO ROA - 2011 RENAISSANCE BLVD #305 MIRAMAR, FL 33025	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS 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.

SIGNATURE: *Alfredo L. Roa* **ALFREDO L. ROA** 01/29/03 (305)821-3636

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date