

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2003 8:00 am
Secretary of State

US1 / 000
AV

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1. Entity Name
ANAVITARTE & MORE CORPORATION

03-20-2003 90383 001 ****13.75
03-20-2003 90383 002 ***150.00

Principal Place of Business
**12072 S.W. 131 AVE.
MIAMI FL 33186**

Mailing Address
**12072 S.W. 131 AVE.
MIAMI FL 33186**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

01-0612110

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~MAZUELOS PARODI, RAUL A~~
**6175 N.W. 153RD ST.
SUITE 10
MIAMI LAKES FL 33014**

Name

MAZUELOS PARODI, RAUL A

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

12072 SW 131 AV

City **MIAMI**

FL

Zip Code
33186

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
NAME **ANAVITARTE RUIZ DE S, FEDERICO L**
STREET ADDRESS **6175 N.W. 153RD ST. SUITE 101**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **PD** Change Addition
NAME **ANAVITARTE RUIZ DE S, FEDERICO L**
STREET ADDRESS **12072 SW. 131 AV**
CITY-ST-ZIP **MIAMI, FL, 33186**

TITLE **VD** Delete
NAME **MAZUELOS PARODI, MARIA**
STREET ADDRESS **6175 N.W. 153RD ST. SUITE 101**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **VD** Change Addition
NAME **MAZUELOS PARODI, MARIA**
STREET ADDRESS **12072 SW 131 AV**
CITY-ST-ZIP **MIAMI, FL, 33186**

TITLE **TD** Delete
NAME **MAZUELOS PARODI, RAUL A**
STREET ADDRESS **6175 N.W. 153RD ST. SUITE 101**
CITY-ST-ZIP **MIAMI LAKES FL 33014**

TITLE **TD** Change Addition
NAME **MAZUELOS PARODI, RAUL A**
STREET ADDRESS **12072 SW 131 AV**
CITY-ST-ZIP **MIAMI, FL, 33186**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE RAUL MAZUELOS**

02/27/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)