
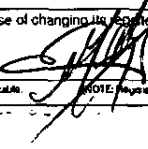
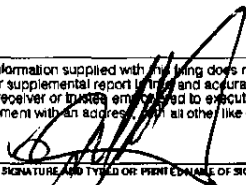


**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # P02000021507</b> 1. Entity Name <b>IVANCUZ CORP.</b>		
Principal Place of Business 14822 SW 70 ST MIAMI, FL 33193		Mailing Address 14822 SW 70 ST MIAMI, FL 33193
2. Principal Place of Business <b>11215 SW 130 AVE</b> Suite, Apt. #, etc.	3. Mailing Address <b>11215 SW 130 AVE</b> Suite, Apt. #, etc.	
City & State <b>MIAMI FL</b>		City & State <b>MIAMI FL</b>
Zip <b>33186</b>	Country <b>USA</b>	4. FEI Number <b>04-3675721</b>
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable
6. Name and Address of Current Registered Agent CURVELO, IVAN 14822 SW 70 ST MIAMI, FL 33193		7. Name and Address of New Registered Agent Name <b>CURVELO IVAN</b> Street Address (P.O. Box Number is Not Acceptable) <b>11215 SW 130 AVE</b> City <b>MIAMI</b> State <b>FL</b> Zip Code <b>33186</b>
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 <b>IVAN CURVELO</b>  DATE <b>7/30/03</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when necessary)</small>		
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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 Block 11 if changed, or on an attachment with an address, in all other like empowered.		
SIGNATURE: 		Date <b>7/30/03</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone # <b>(305) 281-9023</b>

CFR6034 (10/02)

Attachment

80136086

PD2000021507

Wednesday, July 30, 2003

**Division of Corporation  
Uniform Business Report Filings**

**From: IVANCUZ, CORP.  
P02000021507**

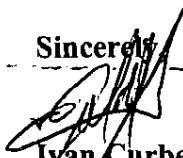
Through this I want to notify that the papers for Uniform Business report never been send to me.

I went to an Accounting Office and they let me Know the amount to be pay for the company and also the reports.


I apology for the inconvenient then here I am sending my payments for the year of 2003.

Any question contact me (305) 281-9023

Sincerely,

  
Ivan Curbelo  
Registered Agent



  
Luis R. Blanco  
Commission # DD125150  
Expires July 13, 2006  
Bonded Thru  
Atlantic Bonding Co., Inc.