2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State
03-10-2003 90733 045 ***150.00

DOCUMENT # P02000075341

1. Entity Name
IPANEMA MARKETING CO.

Principal Place of Business	Mailing Address
6600 MISSION CLUB BLVD. 308 ORLANDO FL 32821	6600 MISSION CLUB BLVD. 308 ORLANDO FL 32821

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
5028 Park Central Dr	5028 Park Central Dr
Suite, Apt. #, etc.: Apt. 2134	Suite, Apt. #, etc.: Apt 2134
City & State: Orlando Florida	City & State: Orlando Florida
Zip: 32839 Country: U.S.A	Zip: 32839 Country: U.S.A

4. FEI Number 06-1638651 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TORO, RUBEN D 7345 SAND LAKE RD. 204 ORLANDO FL 32819	Name: JULIANA N. LIMA Street Address (P.O. Box Number is Not Acceptable): 5028 Park Central Dr. # 2134 City: Orlando FL Zip Code: 32839

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] 2/28/03
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 NAME STREET ADDRESS CITY-ST-ZIP	DPST LIMA, JULIANA N 6600 MISSION CLUB BLVD. #308 ORLANDO FL 32821	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 5028 Park Central Dr. #2134 Orlando Fl 32839
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/02)

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 REQUIRED [signature] 2/28/03 407-489-0164
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #