2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE

Mar 12, 2003 8:00 am Secretary of State P02000096135 DOCUMENT # 03-12-2003 90140 022 ***158.75 1. Entity Name SARQUIS CORPORATION Principal Place of Business Mailing Address 155 S MIAMI AVE STE 1111-B 155 S MIAMI AVE STE 1111-B MIAMI FL 33130 MIAMI FL 33130 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 54-2071585 Not Applicable Zip Country Country 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 Name LAW OFFICES OF ROBERT KRAVITZ PA 155 S MIAMI AVE STE 1111-B Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33130 -City Zip Code 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 SIGNATURE Signature, typed or printed name of registered agent and site 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Defete TITLE SARQUIS, GUSTAVO (10/02) NAME ☐ Addition NAME STREET ADDRESS 155 S MIAMI AVE STE 1111-B STREET ADDRESS CITY-ST-ZIP MIAMI FL 33130 CR2E034 CITY-ST-ZIP ☐ Delete NAME Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Defete □ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE NAME ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP MILE ☐ Delete TITLE NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE NAME Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP 12. I hereby certify that the information supplied with this filling 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 of the report 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

FILED

(305) 539-0003Daytime Phone #

ATTACHMENT

LAW OFFICES OF ROBERT KRAVITZ, P.A.

155 S. Miami Avenue, Suite 1111 - Miami, Florida 33130 Tel.: (305) 539-0003 - Fax: (305) 539-1029 attorney@kravitzlaw.com www.kravitzlaw.com

March 8, 2003

FLORIDA DEPARTMENT OF STATE **Division of Corporations** ANNUAL REPORTS SECTION P.O. Box 1500 Tallahassee Florida 32302

UBR 2003 SARQUIS CORPORATION P02000096135 Re:

Dear Sir or Madam:

In connection with the above referenced annual report, enclosed please find our check number 5764 in the amount of \$158.75 replacing our previous check mailed on February 18 that was improperly filled out.

Thank you in advance for your prompt assistance in this regard.

Very Truly Yeur

Robert A. Kravitz, Esq.,

Law Offices of Robert Kravitz, P.A.

RK:cls

Enclosures:

P02000096135 UBR - Sarquis Corp. Check in the amount of \$158.75

Copy 02/27/03 Letter-Secretary of State

AW OFFICES OF ROBERT KRAVITZ ATTACHMENT

55 S MIAMI AVE SUTE 1111 IIAMI, FL 33130-1609

WCMA® Working Capital
Management™ Account

DATE	02/	18	/03
DATE			,

Florida Department of State *******

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