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

FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91838 025 \*\*\*150.00

DOCUMENT#	P02000101588



1. Entity Name	e	V					
	A Q P MULTISER	VICE CORP.					
	DO NOT WRITE	IN THIS SP	ACE				
2. Principal Pl	lace of Business	3. Mailing Address					
4711 NW 79th Street 2470 NW 102 Suite, Apt. #, etc. Suite, Apt. #, etc.			2 Place		DO NOT WRITE IN TH	IS SBACE	
-104 =		1.04			DONO! WRITE IN TH	is space	
City & State	City & State City & State			<b>4.</b> F	El Number	Applied For	-
MTAMI	<del>, </del>	MIAMI, FL	<b>0</b>		04-3714400	Not Applicable	
33166	Country U.S.A.	33172	Country U.S.A	5. 0	Certificate of Status Desired	\$8.75 Additional Fee Required	
				7. Na	me and Address of Current Registe	red Agent	
		<u> </u>	Name	DANTEL	A J. VALERI		
	DO NOT W	RITE			ox Number is Not Acceptable)		,
	IN THIS SP	ACE				-	
	nt iino or	AUL		2470 NW 102 PLACE # 104			
			City	MIAMI	<u>,                                    </u>	L 33172	
	named entity submits this statement for	the purpose of changing its r	egistered office or	registered agi	ent, or both, in the State of Florida. I a	m familiar with, and accept	
the obligati	ions of registered agent.	, , ,	/_ 100	12.11			
SIGNATURE _	Woviela J. VAL	eri M	wellm	UUS_	04/24	03	
	Signature, typed or printed name of registered agent a nuary 1 - May 1 Fee is \$150.00	and title if applicable.	Registered signatu	ra required when re	instating) / DAT	E	
	After May 1, Fee is \$550.00				9. Election Campaign Financing	\$5.00 May Be	
Make Check	Amended UBR is \$61.25 * Payable to Plonda Department of	State -	<del></del>		Trust Fund Contribution.	Added to Fees	
10.	OFFICERS AND I						_
TITLE	PRESIDENT		HTLE .NAME	* '			2/02
name Street Adoress	CESAR OBLITAS		STREET ADORESS:		The second of the second		2
CITY-ST-ZIP	13324 Braddock F	Rd, Clifton	CITY-ST-7IP				E034B
TITLE	VICE_PRESIDENT	•	ከኪፅ		•		<b>P</b> 2E
NAME .	ROCIO VALDIVIA		KAME	-			Ö
STREET ADORESS CITY-ST-ZIP	13324 Braddock F	Rd, Clifton	STREET ADORESS Chty-st-zip				
TITLE	Va, 20124		DILE .		and the second s		
NAME	NI 1/2		HAME				
STREET ADORESS	N/A		STREET ADDRESS CITY-ST-ZIP		DO NOT WE	RITE	
CITY-ST-ZIP TITLE			DILE		<del> </del>		
NAME	N/A		NAME		IN THIS SPA	ACE	
STREET ADDRESS	·		STREET ADORESS		v		
CITY-S1-ZIP			CITY-SI-7IP	specific and an experience of	A Commence of the commence of		-
TITLE NAME	N/A	and the same of th	HILE		and the property of the same of		
STREET ADDRESS	N/A		STREET ADDRESS				
City-st-zip			CITY-ST-ZIP				
TITLE	/-		TITLE				
NAME STREET ADDRESS	N/A		NAME STREET ADDRESS				
CITY-ST-ZIP			CHY-ST-7IP	:	in the second of		
<b>12.</b>   hereby d	certify that the information supplied with	this filing does not qualify for	the exemption stat	ed in Section	19.07(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 Statules; and that my name appears in Block 10 or on an attachment with an addression, all other like empowered.

SIGNATURE:

A Q P Multiservice Corp.

70050974 Po200061558

4711 NW 79th St..# 104 Miami, Fl 33166 Phone: 786-3552278 e-mail: rociovaldivia@hotmail.com

April 24, 2003.

Division of Corporations Uniform Business Report Filings P.O Box 1500 Tallahassee, Fl 32302-1500

Dear sir Or Madam;

Enclosed please find Uniform Business Report (UBR) of A Q P MULTISERVICE CORP., with Money Order for \$ 150,00 to name of Florida Department of State. This is sent for its registration.

Please let me know about the registration of this Uniform Business Report (UBR).

Sincerely,

Rocio Valdivia