

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

UBR03/ A1

DOCUMENT # P02000125543

1. Entity Name
YAPOU INTERNATIONAL CORP.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 FEB 17 AM 11:32

Principal Place of Business
17024 SW 142 PL
MIAMI FL 33177

Mailing Address
17024 SW 142 PL
MIAMI FL 33177



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

CHECK HERE IF MAKING CHANGES

4. FEI Number
65-0922645
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

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI FL 33145

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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 the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	PD GAUCHIER, YVANS J 17024 SW 142 PL MIAMI FL 33177	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	14720 SW 111 Terrace MIAMI FL 33196
<input type="checkbox"/> Delete	VD GAUCHIER, ALIX J 17024 SW 142 PL MIAMI FL 33177	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	14720 SW 111 Terrace MIAMI FL 33196
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	100013633151 03/06/03--01060--023 **150.00
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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: Alix Gauchier 2/12/03 786-547-2739
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #