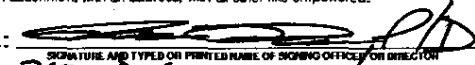


FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90156 004 ***150.00

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

DOCUMENT # P98000083810			
1. Entity Name PERSIAN PRINCESS INTERNATIONAL, INC.			
Principal Place of Business 1500 OCEAN DR STE-706 MIAMI BEACH, FL 33139 US		Mailing Address 1500 OCEAN DR STE-706 MIAMI BEACH, FL 33139 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 65-0868044		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PIETRO, PERCI 1500 OCEAN DR STE-706 MIAMI BEACH, FL 33139		7. Name and Address of New Registered Agent 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 fee if applicable. (NOTE: Registered Agent's signature required when submitting)			
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		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
DP PIETRO, PERCI 1500 OCEAN DR STE-706 MIAMI BEACH, FL 33139		P/D PIETRO, PERCI 1500 OCEAN DRIVE SUITE 706 MIAMI BEACH, FL 33139	
D SHAKOORI, SHANAZ 3131 S. RIDGE DR AKRON, OH 44333		V/D RAFECAS, JOSE 3131 SOUTH RIDGE DRIVE AKRON, OH 44333	
D RAFECAS, JOSE 3131 S. RIDGE DR AKRON, OH 44333		S/D SHAKOORI, SHANAZ 3131 SOUTH RIDGE DRIVE AKRON, OH 44333	
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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 time empowered.			
SIGNATURE: 		04/01/03 305-984-4700	
PERCI PIETRO		Date	