

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 AUG -6 AM 8:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 001000115258

1. Entity Name

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
2700 Biscayne Blvd.

3. Mailing Address  
2700 Biscayne Blvd.

Suite, Apt. #, etc.

City & State  
Miami, Florida

City & State  
Miami, FL

Zip  
33139

Country  
Miami-Dade

Zip  
33139

Country  
Miami-Dade

4. FEI Number  
65-1149181

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$6.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
Yamilka Beaud

Street Address (P.O. Box Number is Not Acceptable)  
2700 Biscayne Blvd.

City  
Miami

FL

Zip Code  
33129

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.

SIGNATURE Yamilka Beaud 7/30/03

Signature: Type or printed name of registered agent and date if applicable (NOTE: Registered Agent signature is required when recording)

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

| 11. OFFICERS AND DIRECTORS                     |                                                                     |                                                |                                               |
|------------------------------------------------|---------------------------------------------------------------------|------------------------------------------------|-----------------------------------------------|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | President<br>Yamilka Beaud<br>119 S.W. 23rd Road<br>Miami, FL 33129 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | 000022115710<br>08/06/03--01057--003 **158.75 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |                                               |

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Yamilka Beaud 7/30/03 786-924-4125 ext 18

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR200348 (12/01)

7/8/7