03

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
03 JUN 25 AM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # 352735

1. Entity Name
MERE XPRESSIONS, INC

Principal Place of Business | Mailing Address

2. Principal Place of Business
714 N.E. 59 STREET
Suite, Apt. #, etc.
City & State: MIAMI
Zip: 33137 Country: DADE

3. Mailing Address
714 N.E. 59 STREET
Suite, Apt. #, etc.
City & State: MIAMI
Zip: 33137 Country: DADE

4. FEI Number — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
MATZ, GLADYS
714 N.E. 59 STREET
MIAMI, FL 33137

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
714 N.E. 59 STREET
City: MIAMI FL Zip Code: 33137

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
Signature (Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

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

FILE NOW!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MATZ, RUBEN ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 714 N.E. 59 STREET MIAMI, FL. 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O. MATZ, GLADYS ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 714 N.E. 59 STREET MIAMI, FL. 33137
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition 900021133909 06/25/03--01056--004 **158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900021133989 06/26/03--01058--007 **158.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

AV

p 6/25

Attachment

April 25, 2003

Florida Department of Revenue
Jim Smith
Secretary of State
P.O. Box 1500
Tallahassee, Fl 32302-1500

Re: ~~Mere Xpressions, Inc~~
DOCUMENT # 322735

Enclosed please find check in the amount of $158.75 for the year 2002 UNIFORM BUSSINES REPORT. I never received the original form. I apologize for the Inconvenience this may have caused.

Sincerely,

Ruben Matz
714 N.E. 59 Street
Miami, Fl. 33137

P.S. NAME CHANGE (SEE ARTICLES OF AMENDMENT)
FILED ON JANUARY 3, 2001 (SEE ATTACHED)