2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 552922** Jul 19, 2000 8:00 am 1. Entity Name Secretary of State ISMAORLU, INC. 04-04-2000 90026 005 ***150.00 Principal Place of Business Mailing Address 3251-53 NW NORTH RIVER DRIVE 3251-53 NW NORTH RIVER DRIVE MIAMI FL 33142 MIAMI FL 33142 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-1780340 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name RIESGO, LUIS Street Address (P.O. Box Number is Not Acceptable) 1215 SOUTHEAST 12TH STREET HIALEAH FL 33010 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. 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 == FILE NOW!!LFEE IS \$550.00 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. Will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE PD ☐ Delete TITLE Change ☐ Addition NAME RIESGO, ORLANDO NAME STREET ADDRESS STREET ADDRESS 920 S.E. 8TH STREET CITY-ST-ZIP CITY-ST-ZIP HIALEAH, F Delete TITLE ☐ Change ☐ Addition TITLE NAME RIESGO, LUIS NAME STREET ADDRESS STREET ADDRESS 285 E.OKEECHOBEE RD. CITY-ST-7IP CITY-ST-ZIP HIALEAH FL TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

JURE REQUIRED

FOR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

7-14-00

305-638-8180

Daytime Phone #



DOC # 552922 18567

3251-53-55 N.W. North River Drive Miami, Florida

Telefonos: 638-8181 - 638-8180 Fax: 638-2526

July 14, 2000

To whom it may concern:

ON MARCH 30, 2000 We send Check # 1085

Of the Amount of \$150.00, with the form of

2000 uniform Business Report, but the form was

NOT Signed, then I received a copy of the form

o be signed, and we send it back, but we received.

Second notice that we had a fine of \$50.00,

then I Called 1-850-487-6059 and Store with a

"Ustomer Service Representative, and Said to Sign

the form with a letter Explains what happen, because

hey haven't received the form that was Signed.

that we don't need to pay the fine, just to Sign

form, the Check was enter in the Computer and

already Cashed.

Sneirely. Sobil Sugs Isabel Bieses