## **2002 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 664763  1. Entity Name MUNDITOUR, INC.					Apr 24, 2002 8:00 am Secretary of State 04-24-2002 90281 021 ***150.00			
Principal Plac 9201 SW 102 MIAMI FL 331		Mailing Address 9201 SW 102 ST MIAMI FL 33176			1 (Talka aliya alikk alakk jalka bilaa kikk bibik	IAII AIRII BIRII Bi	<b>a</b> n <b>a</b> i <b>a</b> i kaa:	
2. Principal F	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4. !	. FEI Number 59-1982756 Applied For Not Applicable			
Zip	*Country	Zip	Country	<u></u> , ≥5.≥(	Certificate of Status Desired	\$8.75 Add	litional d	
	6. Name and Address of Current F	l l Registered Agent	7. Name and Address of New			<u>'</u>		
			Name					
3935 NW	DEZ, JORGE A 26 ST.		Street Address (I		P.O. Box Number is Not Acceptable)			
MIAMI FL	33142						1	
			City		FL	Zip Code	)	
SIGNATURE  9. This corpo	e named entity submits this statement for which was a statement for significant the statement of registered again at the statement and elects to do so.	TO THE If applicable. (NOTE: Re	gistered Agent signature	required when re	instating) DATE  10. Election Campaign Financing	\$5:00	<b>0</b> May Be	
(See criteria on back)		Make Check Payable to Department of Sta			Trust Fund Contribution. L	J Added	to Fees	
11.	OFFICERS AND D		12.	AD	DITIONS/CHANGES TO OFFICERS AND			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HERNANDEZ, JORGE A 9201 SW 102 ST. MIAMI FL	□ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	VPSD HERNANDEZ, PURA O 9201 SW 102 ST. MIAMI FL	☐ 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	,	☐ Defete	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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	31 G.	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
indicated of the cor	on this report or supplemental report is t	rue and accurate and that my si vered to execute this report as r	ignature shall have	e the same I	119.07(3)(i), Florida Statutes. I further cer egal effect as if made under oath; that I a da Statutes; and that my name appears in	am an officer o	or director	

SIGNATURE: