

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90177 002 *****8.75
07-18-2003 90177 001 ***150.00

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

DOCUMENT # F01000000453

1. Entity Name
BIZTA CORPORATION

Principal Place of Business
19591 DINNER KEY DRIVE
BOCA RATON, FL 33498

Mailing Address
19591 DINNER KEY DRIVE
BOCA RATON, FL 33498

3. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

4. FEI Number
52-2243722

5. Certificate of Status Desired
☒ Additional Required

6. Name and Address of Current Registered Agent
**ANZOLA, ALFREDO
19591 DINNER KEY DRIVE
BOCA RATON, FL 33498**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
Zip Code

8. The above named entity submits the statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am the officer, and accept the obligations of registered agent.

SIGNATURE
Signature, typed or printed name of registered agent and date of application
STATE Registered Agent (Signature, dated when filing)

9. Election Campaign Financing
Trust Fund Contribution
\$5.00 May Be Added to Fee

10. OFFICERS AND DIRECTORS

10.	OFFICERS AND DIRECTORS	11.	ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 11
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP
10.	NAME STREET ADDRESS CITY-STATE-ZIP	11.	NAME STREET ADDRESS CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statute. I further certify that the information indicated on this report or supplemental reports 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 business empowered to prepare this report as required by Chapter 689, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with its expiration date.

SIGNATURE: *[Signature]*
Secretary and Treasurer or President or Director or Officer or Director

7-15-2003 561862 0747

55051690

CR2004 (12/03)

Attachment

55051490
#F01000000453

Boca Raton, July 15, 2003

Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Sir or Madam:

Please be advised that we had never received the Uniform Business Report report. We were incorporated on April 11, 2000 and I believe I should be paying \$150.00 per year to keep my corporation active.

Please make sure you update your records and start sending me the annual reports to the following address:

19591 Dinner Key Drive
Boca Raton, FL 33498

If there are any fees to reinstate the corporation we are requesting with all your respect an abatement of this penalty since we did not receive the annual report.

We appreciate your cooperation

Sincerely,



Antonio Mugica
President