2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

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FILED Apr 11, 2003 8:00 am Secretary of State
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ALEGALLOLA, S.A.		
Principal Place of Business 300 ARAGON AVENUE. STE 205	Mailing Address 300 ARAGON AVENUE, STE 205	
CORAL GABLES FL 33134	CORAL GABLES FL 33134	

3. Melling Address Sulfo, Ap. 1, etc. Sulfe, Ap. 1, etc. CHECK HERE IF MAKING CHANGES Sulfo, Ap. 1, etc. Sulfe, Ap. 1, etc. CHECK HERE IF MAKING CHANGES Zip Country Zip Country S. Certificate of Status Desirod \$6.75 Additional Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Fee Required ARAZOZA & FERNANDEZ-FRAGA, P.A. 2100 SALZEDO STREET, STE 300 CORAL GARRES F. 33134 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffica or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept ne obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept new obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept new obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept new obligations or registered agent, or both, in the State of Florids. Lem familiar with, and accept new obligations or registered agent, or both, in the State of Florids. Lem famil							
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12. Thereby 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		y	this filing does not qualify for	_4	stated in Section 110 07(9Vi). Florida Statutes I further cartify that the information		

indicated on this report or supplied with this himing does not qualify for the exemption stated in Section 119.07(3)(f). Florida statutes, I further certify that this findicated on this report or suppliemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Daytime Phone #