

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000006332

FILED  
Apr 26, 2002 8:00 AM  
Secretary of State

Entity Name: D.V.V. CONSULTING, INC.

## Current Principal Place of Business:

C/O PARR & ASSOCIATES  
100 NORTH EAST LOOP 410, SUITE 770  
SAN ANTONIO, TX 78216

## New Principal Place of Business:

## Current Mailing Address:

C/O PARR & ASSOCIATES  
100 NORTH EAST LOOP 410, SUITE 770  
SAN ANTONIO, TX 78216

## New Mailing Address:

FEI Number: 74-2905878

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete  
Name: DURAZO, JOAQUIN  
Address: ACATL #381,FRACCIONAMIENTO IND. SAN ANTON.  
City-St-Zip: AZCAPOTZALCO, MEXICO, D.F.,

Title: SD ( ) Delete  
Name: RECINAS, GILBERTO  
Address: VOLADOR 51, DEPT. 101, LOMAS VERDES V SEC.  
City-St-Zip: NAUCALPAN EDO. DE MEXICO, CP,

Title: TD ( ) Delete  
Name: RUIZ, ROBERTO  
Address: AV DE LAS ISLAS #86, COL. ATLANTA,  
City-St-Zip: CUAUTITLAN IZCALLI, MEXICO CP,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO RUIZ FACUNDO

TD

04/26/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date