2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F25926



FILED Mar 03, 2003 8:00 am Secretary of State

1. Entity Name MARINSA MIAMI CORPORATION								03-03-2003 909	954 029 ***15	50.00
Principal P 14250 S.W. UNIT NO. 4 MIAMI FL 3		14250 UNIT 1	Mailing Address 14250 S.W. 136TH ST. UNIT NO. 4 MIAMI FL 33186				I A nduna dha dhan adha dhan dhan d	III BIBN GIBN BIBN BI	0 /1 2/0 /1 0 /0/1 (00)	
Principal Place of Business 3. Mailing Address					dress					
Suite, Ap	pt. #, etc.	ì	Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES		
City & State			City & State				4.	4. FEI Number 59-2078984 Applied For Not Applicab		
Zip 			Zip			itry	5.	Certificate of Status Desired [\$8.75 A	Additional
	6. Name	and Address of Currer	nt Registered	Agent			\	Name and Address of New Regis	ree Requ	rea
	****	eg e				Name			stered Agent	 .
	WALCHU				2.5					
MARINSA MIAMI CORP						Street Addre	ess (P.O.	Box Number is Not Acceptable)	<u> </u>	
14250 S	.W. 136TH S	T. UNIT 4				-			-	
MIAMI FI	L 33186									i
						City		· · · · · · · · · · · · · · · · · · ·	FL Zip Co	ode
8. The above the obligation	re named entity ations of regist	y submits this statement ered agent.	or the purpos	e of changing its	registere	d office or reg	istered a	gent, or both, in the State of Florida.	I am familiar with	n, and accept
SIGNATURE	8:	or printed name of registered agen	. /		_					
		/	yand title if applica	ible. (NOTI	E: Registered	Agent signature rec	quired when r	reinstating)	DATE	 -
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financir Trust Fund Contribution.		00 May Be
10.		OFFICERS AND	DIRECTORS		11.		Δ.	DITIONS (CHANCES TO OFFICE		
TITLE	DP			☐ Delete	TITLE	<u> </u>		ODITIONS/CHANGES TO OFFICERS		
NAME SERVE ARREST	WALCHLI,	UELI			NAME				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP		148TH AVE DR			STREE	T ADDRESS				į
	MIAMI, FL	00000			CITY-S	ST-ZIP				}
TITLE	DST	2005 14		☐ Delete	TITLE				Change	Addition
NAME Street address	WALCHLI, I	ROSE M			NAME				Change	L_ Addition
CITY-ST-ZIP	MIAMI, FL (148TH AVE DR			STREET	ADDRESS				ļ
TITLE	IAUTANA I F A	J0000	<u> </u>		CITY-S	T-ZIP				ſ
NAME		August a room		☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS			-	: ** · · · · · · · · · · · · · · · · · ·	- NAME	1	پ. در ساسته	- 7 - 7 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 		
CITY-ST-ZIP					CITY-S	ADDRESS				
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ITLE	-			☐ Delete	TITLE					
AME					NAME	İ			☐ Change	☐ Addition
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ITY-ST-ZIP					CITY-ST	-ZIP				
TLE				☐ Delete	TITLE				☐ Change	Addition
AME TREET ADDRESS					NAME					Addition
TY-ST-ZIP					STREET A					
					CITY-ST	-ZIP				l

12. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _