2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

Principal Place of Business

20 METRO CENTRE

LONDON NW 10 7 PA

BRITANNIA WAY

F97000003464

Mailing Address

BRITANNIA WAY

20 METRO CENTRE

LONDON NW 10 7 PA

1. Entity Name

AMANCAY LIMITED COMPANY



FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90215 002 ***150.00

O WE TO	

2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & Stat	е	*	City & State				4. FEI Number	NOT APPL	ICABLE		oplied For ot Applicable	
Zip Country Zip Co					ntry	5. Certificate of Status Desired See Required \$8.75 Additional Fee Required						
	6. Name an	d Address of Current Re	gistered Agent				7. Name and A	ddress of New	Registered	Agent		
WONG, EUGENE 4691 N. UNIVERSITY DR.					Name Street Address (P.O. Box Number is Not Acceptable)							
CORAL SPRINGS FL 33067						City FL Zip Code						
the obligation of the state of	Signature, typed or p	ibmits this statement for the dagent. Intel name of registered agent and FEE IS \$150.00 Fee with be \$550.00					when reinstating) 9. Elect	ion Campaign F	DATE	\$5.0		
		orida Department of S	tate					Fund Contribution			I to Fees	
10.	······································	OFFICERS AND DI	RECTORS	11.			ADDITIONS/C	HANGES TO OF	FICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC STEINHAUER, JORGE 86 LADBROKE GROVE, LONDON W11 2HE ENGLAND									☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY: ST-ZIP		NDY ENTRE, BRITANNIA W /10.7PA ENGLAND		- E	_	5) 49 5)	THER I LEYLAND	LAWRENCE S AVE S, HERTS	NUE,	□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATALLA, JO 22 MYRTLE I ENGLAND	OSE ROAD, ACTON, LONDO	Delete							☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAM STRE						☐ Change	☐ Addition	

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 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 of the corporation or the receiver or thus be employed 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 a paddress with all other like employered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

24.03.03

0208 963 1322

Daytime Phone #

;R2E034 (10/02)