2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

F99000004991

1. Entity Name BANMETROPOLITANO CORP.



Apr 03, 2003 8:00 am 3 Secretary of State 04-03-2003 90136 004 ****

1101 S VERMI SUITE 112 GC LOS ANGELES)LD PLZA	·	Mailing Address 1101 S VERMONT AVE SUITE 112 GOLD PLZA LOS ANGELES CA 90006 3. Mailing Address								
2. Principal F	Place of Busin	ess							BANG BIBAN (BI)	18 10101 1101 1201	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City & State			4.	FEI Number 95-447952	25	 	Applied For	
Zip		Country	Zip	Count	try	5.	Certificate of Status Desire		\$8.75 A Fee Requi	dditional	
	6. Name	and Address of Current F	legistered Agent			7.	Name and Address of Nev	v Registered /	Agent		
	DIEGO L	PEATOPOA.			Name						
	. DIEGO L.I		Street Add			ddress (P.O. E	ress (P.O. Box Number is Not Acceptable)				
CORPORATION COMPANY OF MIAMI 201 SOUTH BISCAYNE BLVD1500 MIAMI CENTER											
f1 -		IE BLVD1500 MIAMI CI	ENIEK								
MIAMI FL	33131			. [City			FL	Zip Co	ode	
		submits this statement for	the purpose of changing i	its registere	d office o	r registered ag	gent, or both, in the State of	Florida. I am i	familiar with	n, and accept	
the obligat	tions of regist	ered agent		_							
SIGNATURE)		while	WIS ALFRE	DO MÉ	17.EZ 6	٤		03.78	2003		
	gnature, typed	or printed name of registered agent ar	nd title if applicable. (No	OTE: Registered	Agent signat	ture required when r	reinstating)	DATE			
Afte	r May 1, 200	! FEE \$150.00 3 Fee will be \$550.00 Florida Department of	State				9. Election Campaign Trust Fund Contribu			00 May Be ed to Fees	
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12. I hereby certify that the information supplied with this filling 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 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:

RECHIRFED MÉNEZ R.

03-28-2003

(213)427-7611 Daytime Phone #