

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G06841

FILED
Apr 10, 2003
Secretary of State

Entity Name: CORDOVEZ ENTERPRISES, INC.

Current Principal Place of Business:

1560 N. POWERLINE ROAD
POMPAÑO BCH., FL 33069 US

New Principal Place of Business:

Current Mailing Address:

409 PLAZA AVENUE
LAKE PLACID, FL 338529518 US

New Mailing Address:

FEI Number: 59-2307213

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWTON, DONALD S SR
409 PLAZA AVENUE
LAKE PLACID, FL 338529518 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CORDOVEZ, GUILLERMO P
Address: 409 PLAZA AVENUE
City-St-Zip: LAKE PLACID, FL 33852

Title: VD () Delete
Name: CORDOVEZ, GUILLERMO VP
Address: 409 PLAZA AVENUE
City-St-Zip: LAKE PLACID, FL 33852

Title: STD () Delete
Name: DE CORDOVEZ, LUZ MARIA ST
Address: 409 PLAZA AVENUE
City-St-Zip: LAKE PLACID, FL 33852

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: GUILLERMO P CORDOVEZ

PD

04/10/2003

Electronic Signature of Signing Officer or Director

_____ Date