2001 UNIFORM BUSINÉSS REPORT (UBR)

DOCUMENT # G38192 1. Entity Name

PETER DE LA ROSA P.L.S., INC.

Principal Place of Business

Mailing Address

% PETER DE LA ROSA

% PETER DE LA ROSA

959 SW 122ND AVE. MINORCA PLAZA MIAMI FL 33184

959 SW 122ND AVE. MINORCA PLAZA

MIAMI FL 33184

	2. Principal Place of B	usiness	3. Mailing Addres				
	Suite, Apt. #, etc.		Suite, Apt. #, et	DO NOT WE			
r	City & State		City & State		4. FEI Number 59-23053		
	Zip	Country	Zip	Country	5. Certificate of Status Desired		

FILED Feb 03, 2001 8:00 am Secretary of State 02-03-2001 90292 001 ***150.00



RITE IN THIS SPACE

City & Stat	e	City & State	City & State		4. FEI Number 59-2305313			plied For			
Zip	Country	7in	0					Not Applicable			
			Country	5.	5. Certificate of Status Desired S8.75 Addition Fee Required						
	6. Name and Address of Curre	ent Registered Agent			Name and Address of New Regi	stered Age	nt:~~				
מר ו	A DOOA PETER		'	Name							
	A ROSA, PETER SOUTHWEST 127 COURT			Street Address (P.O. Box Number is Not Acceptable)							
	11 FL 33175		<u></u>								
THE WA	11 60110										
				City	V	FL	Zip Code	e			
8. The above	named entity submits this statemen	t for the purpose of changing it	ts registered o	office or registered a	gent, or both, in the State of Florida	 1.					
	•			3	,						
SIGNATURE .	<u> </u>				•						
, ,	Signature, typed or printed name of registered ag	gent and title if applicable. (NO	TE: Registered Age	ent signature required when	reinstating)	DATE					
9. This corpo	pration is eligible to satisfy its Intang	ble FILE NOW	/!!! FEE IS	\$150.00	10 51 11 0 1 5						
	requirement and elects to do so.	_ After MAY 1, 2			 Election Campaign Finance Trust Fund Contribution. 	ing 🗆	\$5.00 May Be Added to Fees				
(See criter	ria on back)		able to Depa	rtment of State	Traditional domination.	_	Added	10 1 003			
11.		ND DIRECTORS	12.	Al	DDITIONS/CHANGES TO OFFICE	RS AND DIE	RECTORS	3 IN 11			
TITLE	PTD	☐ Delete	TITLE] Change	☐ Addition			
NAME	DE LA ROSA, PETER		NAME								
TREET ADDRESS	5432 S.W. 127 COURT		STREET AC CITY-ST-								
	MIAMI FL VSD	——————————————————————————————————————		217							
TTLE NAME I	DE LA ROSA, YARA	☐ Delete	TITLE] Change	☐ Addition			
TREET ADDRESS	5432 S.W. 127 COURT		STREET AL	IDRESS							
CITY-ST-ZIP	MIAMI FL		CITY-ST-								
TTLE		Delete	TITLE		-	··- r	Change	☐ Addition			
IAME		L Doicit	NAME				Change				
TREET ADDRESS			STREET AD	DORESS							
ITY-ST-ZIP			CITY-ST-2	ZIP							
ITLE		☐ Delete	TITLE] Change	☐ Addition			
IAME			NAME								
TREET ADDRESS			STREET AC								
ITY-ST-ZIP			CITY-ST-	ZIP	777						
ITLE		☐ Delete	TITLE				Change	☐ Addition			
AME			NAME	200							
TREET ADDRESS		•	STREET AC	1							
TLE	. 10-10-1	□ 6.1.1.			****			- Autono			
AME		☐ Delete	TITLE NAME			Ц	Change	☐ Addition			
TREET ADDRESS			STREET AD	DRESS							
CITY-ST-ZIP			CITY-ST-Z	1				•			
of the corp	ertify that the information supplied w on this report or supplemental repor poration or the receiver or trustee en or on an attachment with an addres	t is true and accurate and that apowered to execute this repor	my signature t as required l	shall have the same by Chapter 607, Flor	legal effect as if made under oath; ida Statutes; and that my name ap	that Iam a	n officer r	or director			
SIGNAT		R PRINTED NAME OF SIGNING OFFICER	ARA R OR DIRECTOR	OELA,	ROSA S.	1/2 Daytim	9/0/ e Phone #	! 			