

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**  
 05-06-2002 90169 045 \*\*\*150.00

UBR0211 AV

**DOCUMENT # G77582**  
 1. Entity Name  
**HUMBERTO E. RUIZ & ASSOCIATES, CO.**

Principal Place of Business      Mailing Address  
~~2290 NW BOCA RATON BLVD~~      ~~2290 NW BOCA RATON BLVD~~  
~~STE 10~~      ~~STE 10~~  
~~BOCA RATON FL 33431~~      ~~BOCA RATON FL 33431~~  
 US      US



2. Principal Place of Business      3. Mailing Address  
**6971 N. FEDERAL HWY.**      **6971 N. FEDERAL HWY**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**SUITE 402**      **SUITE 402**  
 City & State      City & State  
**BOCA RATON, FL**      **BOCA RATON, FL**

DO NOT WRITE IN THIS SPACE

4. FEI Number      Applied For  
**59-2350220**      Not Applicable

5. Certificate of Status Desired       **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**RUIZ, HUMBERTO E.**  
~~2290 NW BOCA RATON BLVD~~  
~~STE 10~~  
~~BOCA RATON FL 33431~~

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
**6971 N. FEDERAL HWY**  
**SUITE 402**  
 City      State      Zip Code  
**BOCA RATON**      **FL**      **33487**

8. 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: *[Signature]*      DATE: **4/1/02**  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)     

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.       **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	RUIZ, HUMBERTO E	790 NE 73 ST	BOCA RATON FL 33487	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*      DATE: **4/1/02**      DAYTIME PHONE #: **561-995-2204**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)