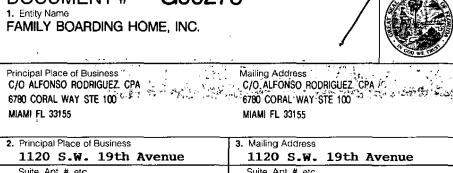
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

G90275 DOCUMENT #





05-05-2003 91768 029 ***158.75

C/O ALFONSO	e of Business O RODRIGUEZ. WAY STE 100 [©]	CPA _	C/O./ 6780	Address LEONSO RODRIGU CORAL WAY STE 1 FL 33155	IEZ CPA			And he									TPS Talks
2. Principal P		-															
1120 S.W. 19th Avenue				1120 S.W. 19th Avenue													
Suite, Apt. #, etc.				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES									
City & State Miami, FL 33135				& State		4. FEI Number 59			59-24	11261	4			Applie Not Ap	d For	7	
Zip	Country			Zip Cou			untry			5. Certificate of Status Desired				8.75 / ee Requ	Additional equired		
	6. Name a		7. Name	and Ac	idress	of New	Regist	ered A	gent			1					
CARRATAI	LA, SOFIA	turing the second secon				Name Howa	rd L.	Kuker				-			-]
	19TH AVE						Street Address (P.O. Box Number is Not Acceptable) 9200 South Dadeland Boulevard										
MIAMI FL 33135						Suite 508											
<u> </u>						Miami, F						FL	EL Zip Code 33156				
8. The above the obligati	named entity s ions of register	ubmits this state ed agent.	ment for the purpo	se of changing its	registere	ed office or	registere	d agent, or	both, i	n the Si	ate of F	lorida.	l am fa	ımiliar wit	th, and	accept	1
SIGNATURE -	<u>.</u>	shiel 1	Mh-								Ap	ril	30,	2003			
	Signature, typed of	printed name of registe	red agent and title if appli	cable. (NOT	E: Registered	Agent signatu	re required w	hen reinstating				_	DATE]
After	May 1, 2003	FEE IS \$150. Fee will be \$5 lorida Departr	50.00					9.			paign F ontributi		ng 🗆		.00 N ded to	lay Be Fees	
10.		OFFICEF	RS AND DIRECTOR	RS ,	11.			ADDITIO	NS/CH	IANGES	TO OF	FICER	S AND I	DIRECTO	DRS IN	11	1
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NAME STREET ADDRESS CITY-ST-ZIP	v.	14		□ Delete			Rube: 1120	and D n Cort S.W. i, Flo	19t)	h Av			Х	Chang	e \square	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		□ Delete									- ~	☐ Change	e [Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	pertifice that the in	formation suppl	ied with this filing o	Delete	CITY-	et address st-zip	ed in Sec	tion 110 07	(3)(:)	Florida (Statuton	f,		Change		Addition	-

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: