FOR PROFIT CORPORATION 2002 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 25, 2002 8:00 am Secretary of State

DOCUME 1. Entity Name	NT # G98062	V			03-25-2002	90039 01	6 ***150.00
·	d Management c	of Miami, I	nc.				
DO	NOT WRITE	IN THIS SE	PACE				
2. Principal Place	of Business	3. Mailing Address					
1519 Pond	ce de León Ave	1519 Ponce	de León	Ave.			
Suite, Apt.#, e Suite 50		Suite, Apt.#, etc. Suite 507			DO NOT WRITE IN	THIS SPAC	E
city & State Santurce	, PR	City & State Santurce,	PR		4. FEI Number 52-1341146		Applied For Not Applicable
Zip 00909-17:	Country 33 USA	Zip 00909-1733	Country USA		5. Certificate of Status Desired	1 1 7	75 Additional Required
					Name and Address of Current Re		
	50 NOT14		Name del	Val1	e, Manuel R		
	DO NOT WI		Street A 7270	Nddress (F) N.W	P.O. Box Number is Not Acceptable) 1. 12th St.		
	IN THIS SP	ACE		e 76	51		
			City Mian	ni		FL 3	3126-192
8. The above nam	ned entity submits this statemen	t for the purpose of chan	ging its registered of	lice or reg	istered agent, or both, in the State o		
SIGNATURE	ature, typed or printed name of regist	A A A A A A A A A A A A A A A A A A A	-No TE Pari	-1			ATE
			- May 1 Fee is \$150		nt signature required when reinstating)		
	on is eligible to satisfy its Intangi rement and elects to do so. n back)	After N Amer	tay 1, Fee is \$550.00 ided UBR is \$61.25 yable to Departmen)	10. Election Campaign Finar Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees
11.	OFFICERS AND D	PIRECTORS	`	1			
	/P egis, John A.,	Лr	title Name				
	ngs Court 70, Cond.						
CITY-ST-ZIP S	<u>anturce, PR 00</u>	911	CITY - ST + ZIP	.			
	/V/S egis, John A.		TITLE NAME				
I .	00 Blvd. de los A	rboles, BZ 31	200000000000000000000000000000000000000				
	<u>ío Piedras, PR</u>	00926	CITY - S1 - ZIP				
	/T licea, John	-	TITLE NAME				
STREET ADDRESS B-	-32 Portal de		STREET ADDRESS		DO NOT W	DITE	
	<u>ío Piedras, PR</u>	00928	CITY - ST - ZIP				
TITLE NAME			TITLE NAME		IN THIS SP	ACE	
STREET ADDRESS			STREET ADDRESS				
TITLE	<u> </u>		CITY - ST - ZIP				
NAME			NAME				
STREET ADDRESS			STREET ADDRESS				
TITLE			CITY - ST - ZIP TITLE				
NAME			NAME				
STREET ADDRESS CITY - ST - ZIP	Λ	\sim	STREET ADDRESS CITY - ST - ZIP				
	that the information upplied vi	th this filting does not qua		stated in	Section 119.07(3)(i), Florida Statute	s. I further c	ertify that the
information ind an officer or dir	icated on this report or supplem rector of the corporation of the re	ental report is true and a	ccurate and that my	signature report as	Section 119.07(3)(i), Florida Statute shall have the same legal effect as i required by Chapter 607, Florida Sta	f made unde	r oath; that I am
appears in Bloo	ck 11 or on all attrichment with	n address, with all other				unu (I)	, resy manner
SIGNATUR	E: <i>/_/////////</i>		John A.	Regi	s, Jr. Mars, 2002	787-7	725-1814
	CICNISTURE AND TOPE	DRING NAME OF SIGNIS	IG OFFICER OR DIREC	TOP	Doto	0-60	- 4