

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # K12008.

1. Entity Name

**DOLPHIN BROKERAGE INTERNATIONAL INC**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 APR -8 PM 1:31

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

**7225 NW 25 STREET**

3. Mailing Address

**SAME**

Suite, Apt. #, etc.

**STE 214**

Suite, Apt. #, etc.

City & State

**MIAMI, FLORIDA**

City & State

Zip

**33122**

Country

Zip

Country

4. FEI Number

**65-0023457**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**DAVID G. KUEPKER**

Street Address (P.O. Box Number is Not Acceptable)

**7225 NW 25 STREET/STE 214**

City

**MIAMI**

FL

Zip Code

**33122**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

03/11/2003

DATE

(NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**P  
DAVID G. KUEPKER  
7225 NW 25 ST/STE 214  
MIAMI, FL 33122**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VP  
JULIA JARQUIN  
7225 NW 25 ST/STE 214  
MIAMI, FL 33122**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

03/11/2003

Date

Daytime Phone #

CR2E034B (12/02)

Division of Corporations  
P.O. BOX 6327  
Tallahassee, FL 32314

Per instructions from Division of Corporations, I am attaching a check in the amount of \$ 750.00 for the annual report fee with my application.

Since September 1998, we moved to Miami and we did not receive the U.B.R. for the years, 1999, 2000, 2001, 2002 and 2003, or any other notice from the Division of Corporations in respect with the Corporation **DOLPHIN BROKERAGE INTERNATIONAL, INC**

Thank you for your courtesy in this matter.

  
**JULIA JARQUIN**  
**VICE-PRESIDENT**