

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K97269

1. Entity Name

FUTURAMA MANUFACTURING INC.

Principal Place of Business

168 S.E. FIRST STREET
PH 13
MIAMI FL 33131
US

Mailing Address

C/O IVAN A GOMEZ
601 BRICKELL KEY DR #507
MIAMI FL 33131
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

IAG CORPORATE SERVICES, INC.
COURVOISIER CENTRE II
601 BRICKELL KEY DR STE 507
MIAMI FL 33131-2623

Name

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

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME FORTUNY, ARNALDO
STREET ADDRESS 168 S.E. FIRST STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE TD
NAME FORTUNY, EMELINA
STREET ADDRESS 168 S.E. FIRST STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE V
NAME FORTUNY, JUAN CARLOS
STREET ADDRESS 168 S.E. FIRST STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE S
NAME FORTUNY, ARNOLD, JR.
STREET ADDRESS 168 S.E. FIRST STREET
CITY-ST-ZIP MIAMI FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD
NAME EMELY FORTUNY
STREET ADDRESS 168 SE 1st St.
CITY-ST-ZIP MIAMI - FL 33131

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ARNALDO FORTUNY, PRES.

Date

Daytime Phone #

305-371-9213

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90218 034 ***158.75



DO NOT WRITE IN THIS SPACE

0151104

CR2E034 (10/00)