2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L04127 1. Entity Name TERESA MARTINEZ-CEDENO, P.A. Principal Place of Business Mailing Address 8390 W. FLAGLER ST. 8390 W. FLAGLER ST. **SUITE 214 SUITE 214** MIAMI FL 33144 MIAMI FL 33144 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

Zip

Country

12.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

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NAME

TITLE

NAME

CITY-ST-ZIP

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STREET ADDRESS

CITY-ST-ZIP

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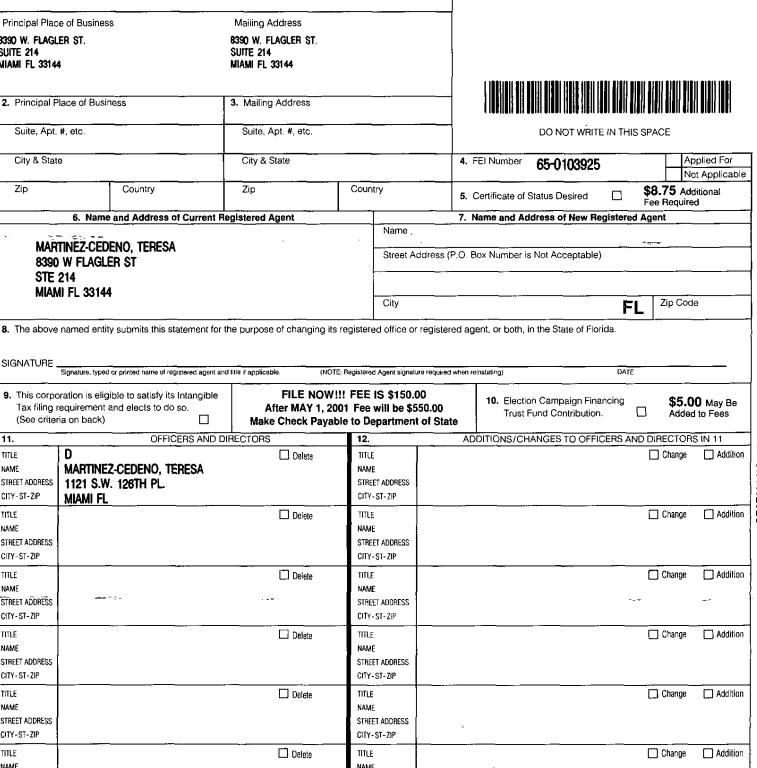
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FILED Jan 23, 2001 8:00 am **Secretary of State**

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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.

Zip

SIGNATURE

11.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Country

MARTINEZ-CEDENO, TERESA

9. This corporation is eligible to satisfy its Intangible

1121 S.W. 126TH PL.

MIAMI FL

MARTINEZ-CEDENO, TERESA

Tax filing requirement and elects to do so.

8390 W FLAGLER ST

STE 214 MIAMI FL 33144

(See criteria on back)

6. Name and Address of Current Registered Agent

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

OFFICERS AND DIRECTORS

ER OR DIRECTOR