

2003

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

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90780 021 ***150.00

DOCUMENT # M13207

1. Entity Name

Fromal Investment Corporation

DO NOT WRITE IN THIS SPACE

10036180

2. Principal Place of Business

1300 S. Army Navy Rd.

Suite, Apt. #, etc.

Suite 923

City & State

Arlington, VA

Zip

22202

Country

USA

3. Mailing Address

1300 S. Army Navy Rd.

Suite, Apt. #, etc.

Suite 923

City & State

Arlington, VA

Zip

22202

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

58-1628211

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required****DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

del Valle, Manuel R.

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

7270 N.W. 12th St., Suite 761

City

Miami

FL

Zip Code

33126

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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 - D/P/S/T
NAME Martinez, Rafael
STREET ADDRESS 701 Ponce de Leon Ave., Suite 407
CITY - ST - ZIP San Juan, PR 00907

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DO NOT WRITE 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:



Rafael Martinez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

3/6/03

787-721-1140

Daytime Phone #

CR2E034B (12/02)