

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M27504

1. Entity Name

DALGYS CORPORATION

Principal Place of Business
 1632 WEST FLAGLER ST
 MIAMI FL 33135
 US

Mailing Address
 1201 SW 104 AVE
 MIAMI FL 33174-2749

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-2636723** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ESTRABAO, JOSE
 1201 S.W. 104 AVENUE
 MIAMI FL 33174

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City Zip Code **FL**

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, 2002 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

TITLE VD Delete
 NAME ESTRABAO, CARLOS
 STREET ADDRESS 9225 SW 45 ST
 CITY-ST-ZIP MIAMI FL 33165

TITLE PTS Delete
 NAME ESTRABAO, JOSE M.
 STREET ADDRESS 1201 SW 104 AVE
 CITY-ST-ZIP MIAMI FL 33174

TITLE Delete
 NAME ¹
 STREET ADDRESS ¹
 CITY-ST-ZIP ¹

TITLE Delete
 NAME ¹
 STREET ADDRESS ¹
 CITY-ST-ZIP ¹

TITLE Delete
 NAME ¹
 STREET ADDRESS ¹
 CITY-ST-ZIP ¹

TITLE Delete
 NAME ¹
 STREET ADDRESS ¹
 CITY-ST-ZIP ¹

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Vice Pres / TAEGAS Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Paes / sec. Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 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:

Jose Estrabao

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/2002

Date

305-251-9394

Daytime Phone #

0276205
AV

FILED
 Mar 20, 2002 8:00 am
 Secretary of State

03-20-2002 90017 014 ***150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)