2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

MIAMI FL 33177

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

US

RAY ALEX HERNANDEZ

15942 SW 138TH CT

DOCUMENT # M40720

1. Entity Name

Principal Place of Business

2. Principal Place of Business

8420 HARDING AVE

8420 HARDING AVE #1

MIAMI BEACH FL 33141

Suite, Apt. #, etc.

City & State

Zip

THE MARLIV CORPORATION



FILED Feb 06, 2003 8:00 am Secretary of State

02-06-2003 90120 006 ***150.00

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☐ CHECK HERE IF MAKING CHA	11 41411 41811 41411 188 1			
4. FEI Number 59-2821961	Applied For			
33 202 130 1	Not Applicable			
	\$8.75 Additional Fee Required			
7. Name and Address of New Registered Agent	1			

GARCIA, GUILLERMO P 7353 SW 22ND ST	Name Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33155					
	City	FL	Zip Code		
. The above named entity submits this statement for the purpose of changing its registered	d office or registered agent, or both, in the State of Florida.	I am fan	niliar with, and accept		

Country

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Country

6. Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

Make Checi	k Payable to Florida Department of State				mader and ex	orienbacion.	_ A000	0 10 7 003	
10.	OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GUILLEAMO, P. GARCIA 7353 SW 22ND ST MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HERNANDEZ, RAY ALEX 15942 SW 138TH COURT MIAMI FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HERNANDEZ, MARIA J. 8640 SW 16TH ST MIAMI FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	5 + ·_ =	٠	· —	☐ Change	☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition	

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 Block 11 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

01-30-03 (305) 264-6813

Daytime Phone

CR2E034 (10/0