

2002 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90037 001 ***150.00

DOCUMENT # **M 49834**
1. Entity Name
Scarpa Enterprises, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9260 SW 72 ST		3. Mailing Address 9260 SW 72 ST	
Suite, Apt. #, etc. # 117		Suite, Apt. #, etc. # 117	
City & State Miami, FL		City & State Miami, FL	
Zip 33173	Country USA	Zip 33173	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2788830	Applied For ☐ Not Applicable
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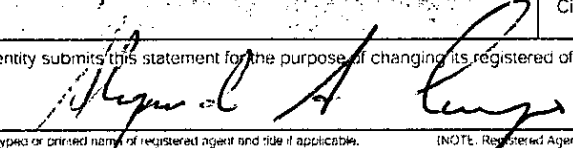
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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7. Name and Address of Current Registered Agent

Name Crespo, Alejandro A.
Street Address (P.O. Box Number is Not Acceptable) 9260 SW 72 street
Suite 117
City Miami
FL Zip Code 33173

DO NOT WRITE IN THIS SPACE

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.

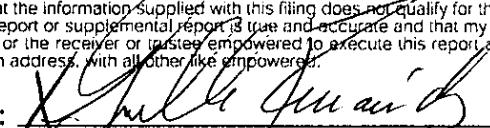
SIGNATURE 	DATE 1/9/02
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9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐	January 1 - May 1: Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PS Giselle Fernandez 9260 SW 72 St. #117 Miami, FL 33173	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD Alexandra Fernandez 9260 SW 72 St #117 Miami, FL 33173	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD Elena Morillo 9260 SW 72 St #117 Miam	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: 	Date 01-14-02	Daytime Phone # 305-445-8219
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CR2E034B (12/01)