2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # N0100007031					FILED				
•	AVES OF PEACE AN	F PEACE AND L		03 JUL 30 PM 3:33					
Principal Plac	ce of Business	Mailing Address	ling Address			SECRETARY OF OTHER			
6967 SW 24TH STREET Mami Fl 33155		6967 SW 24TH STREET MIAMI FL 33155		SECRETARY OF STATE TALLAFIASSEE, FLORIDA					
					1 (40)5(8) 815 81	(8) (18)(60)(4 66 (4) 6 7(4) 6	III CERII I ce ii Icei III		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 6!	5-1142946	⊢ ———	plied For t Applicable	
Zip	Country	Zip	Cou	intry	5. Certificate of St	atus Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current	Registered Agent		Nome		ress of New Registe	red Agent		
ELODES	INCE	يوليون لهجمته مستحا المتحوا	- ∞-r '	Name - JOSE FLORES =					
FLORES, JOSE 6967 SW 24TH STREET				Street Address (P.O. Box Number is Not Acceptable)					
MIAMI FL	_						-		
				City M.	m~;		FL Zip Code	82	
	named entity submits this statement for	or the purpose of changing	its registere	ed office or registe	red agent, or both, in	the State of Florida. I			
the obliga	tions of registered agent.						, ,		
SIGNATURE							7/23/0	<u>×3</u>	
	grature, typed or printed name of registered agent	and title if applicable. (1	NOTE: Registere	d Agent signature require	d when reinstating)	D	ATE	<u>:</u> ::	
•	FILE NOW: FEE IS \$61.25	9. Election (Dampaign F	inancing	\$5.00 May Be	Make Cl	heck Payable t	to l	
After September 10, 2003, min will be \$236.25 Trust Fund Con				on.	Added to Fees		partment of S		
10.	OFFICERS AND DI	L RECTORS	11.	<u> </u>	ADDITIONS/CHANG	ES TO OFFICERS AN	D DIRECTORS IN	10	
TITLE	PSD	. Delete	TITLE	1 1 2	'E FLORES		E hange	☐ Addition	
NAME STREET ADDRESS	FLORES, JOSE 6967 SW 24TH STREET		NAMI STRE		roe hm s	8 LANE		}	
CITY-ST-ZIP	MIAMI FL 33155				mist 33	3182			
TITLE	D DESCRIPTION	☐ Delete	TITLE	Z ~	no Pronës		Change	☐ Addition	
NAME Street address	FLORES, PEDRO 6967 SW 24TH STREET		NAMI STRE	E PEV ET ADDRESS フント	PE W2 01	5 7.		Ì	
CITY-ST-ZIP	MIAMI FL 33155			-ST-ZIP	AMOFL 3				
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NAME STREET ADDRESS	6967 SW 24TH STREET		NAMI STRE	ET ADDRESS 38	50 SW 87	Av.			
CITY-ST-ZIP	MIAMI FL 33155		CITY-		AMOFL 3				
TITLE	D Paredes, Percy	Delete	TITLE			021941	☐ Change	☐ Addition	
NAME STREET ADDRESS	6967 SW 24TH STREET		NAME STRE	ET ADDRESS		0105600			
CITY-ST-ZIP	MIAMI_FL 33155		City	-ST-ZIP	· · · · · · · · · · · · ·				
TITLE NAME		☐ Delete	TITLE NAME	ŀ	•		☐ Change	☐ Addition	
STREET ADDRESS				ET ADDRESS	2				
CITY-ST-ZIP	,		CITY-	ST-ZIP					
TTLE Name	,	☐ Delete	TITLE NAME				☐ Change	☐ Addition	
rame Street address				ET ADDRESS					
CITY-ST-ZIP			CITY-	-ST-ZIP					

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 617, 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: