

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

FILED
Mar 05, 2003 8:00 am
Secretary of State

03-05-2003 90043 011 ****61.25

DOCUMENT # N02000002374

1. Entity Name

RAYO DE ESPERANZA, INC.



Principal Place of Business

**6213 16TH ST. SOUTH
ST. PETERSBURG FL 33705**

Mailing Address

**6213 16TH ST. SOUTH
ST. PETERSBURG FL 33705**

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

95-4896256

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**DODGE, DAVID
6213 16TH ST. SOUTH
ST. PETERSBURG FL 33705**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **RHEA, MICHAEL W**
STREET ADDRESS **P.O. BOX 18F**
CITY-ST-ZIP **GUATEMALA CITY, GUATEMALA**

TITLE **VD** ☐ Delete
NAME **DODGE, DAVID**
STREET ADDRESS **6213 16TH ST. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33705**

TITLE **VD** ☐ Delete
NAME **MORRIS, DONALD**
STREET ADDRESS **110 80TH AVE. SOUTH**
CITY-ST-ZIP **ST. PETERSBURG FL 33705**

TITLE **STD** ☒ Delete
NAME **GRAY, LARRY**
STREET ADDRESS **10271 BLOSSOM LAKE DR.**
CITY-ST-ZIP **SEMINOLE FL 33772**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE ☐ Change ☒ Addition
NAME **SPO**
STREET ADDRESS **Vivian Laird**
CITY-ST-ZIP **9990 36th Ave. N.
St. Petersburg, FL 33708**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

David A. Dodge **DAVID A. DODGE** (David A. Dodge) 02-28-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)