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

## DOCUMENT # N02000002929



## **FILED** Aug 08, 2003 8:00 am Secretary of State

1. Entity Nan	ON LAS BRUMAS INC.	,				08-08-2003 90098	3 014 ****61	.25
Principal Plac 2800 NW 99TH MIAMI FL 3317		Mailing Address 2800 NW 99TH AVENUE MIAMI FL 33172	· _ •			idra libir ablik 88ibi 8bili 86ibi	iri 89418 11818 18148 41	B(B 15)1 125i
2. Principal F	Place of Business	3. Mailing Address		<del></del>				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number		<u>                                     </u>	oplied For ot Applicable
Zip	Country	Zip	Count	try	5. Certificate of 5	Status Desired	\$8.75 Add Fee Require	ditional d
	6. Name and Address of Current	Registered Agent			7. Name and Ad	dress of New Register	red Agent	
. ب <del>ن</del> ور د		پېرود تېمنېدې تا چېښد	:	Name			يستان والمتحد	
MOREIRA, ELSA M			Street Addre		s (P.O. Box Number is Not Acceptable)			
	99TH AVENUE		•			<del>-</del>	·	
miami fl	. 331/2	•	-	City	<u> </u>		Zip Cod	e
	e named entity submits this statement fo tions of registered agent.	r the purpose of changing its	registered	office or register	red agent, or both, ir	n the State of Florida. I	am familiar with,	and accept
and denga	tions of registered agent.							
							(I - 0)	ì
SIGNATURE	Cla m. Mrein					<u> </u>	4-03	
SIGNATURE	Clar M. Mareva Signature, typed or printed name of registered agents	and title if applicable. (NOTE	: Registered A	gent signature required	d when reinstating)		Y - 0 3	
	Signature, typed or printed name of registared agent to FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$2	9. Election Cam	paign Fina	ancing	\$5.00 May Be Added to Fees	Make Ch		
	FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$2	9. Election Cam 236.25 Trust Fund Co	paign Fina	ancing	\$5.00 May Be Added to Fees	Make Ch	neck Payable partment of \$	State
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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:

8-4-03

305-593-8450