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

DOCUMENT # N94000002578*						
C	LUB HUANCAYO DE MIAMI	, INC.	,	03 JUN 25 AM 10: 40		
	DO NOT WRITE	IN THIS SE	PACE	SECRETA TALLAHAS	RY OF STATE SEE, FLORIDA	
•	lace of Business	3. Mailing Address			28	
2121 Coral Way Suite, Apt. #, etc.		2121 Coral Way Suite, Apt. #, etc.			O NOT WRITE IN THIS SPACE	
				4. FEI Number Applied For		
City & State Miami, Fl. 33145		City & State Miami, Fl.		4. FEI Number Applied For Not Applicable		
Zip	Country	Zip 33173	Country	5Certificate of Statu	s Desired \$8.75 Additional Fee Required	
3314	45 U.S. A.	33173	_U.S.A.	7. Name and Address	of Current Registered Agent	
A.	DO NOT WI		Name Olga Awuapara Street Address (P.O. Box Number is Not Acceptable) 2121 Coral Way City Zip Code			
The above named entity submits this statement for the purpose of changing its reg			Miami			
SIGNATURE	Olga Awuapar Signature, typed or printed name of registered agent ar FEE IS \$61.25 —	nd title if applicable. (NOT	Registered Agent signature requirements	\$5.00 May Be	06-18-03 DATE Make Check Payable to	
Initial or Amended UBR Trust Fund Con				Added to Fees	Department of State	
TITLE	OFFICERS AND DIR	ECTORS	TITLE			
NAME STREET ADDRESS CITY-ST-ZIP	Olga Awuapara 2121 Coral Way Miami, Fl. 33145		NAME STREET ADDRESS CITY-ST-ZIP	` CC'C ! 	021131810 -01023002 **8.75	
TITLE NAME	Vice-President Dino Pisfil		TITLE NAME	A State of the sta	,	
STREET ADDRESS CITY-ST-ZIP	16971 S.W. 92 Ave.		STREET ADDRESS	······································	The second secon	
TITLE	Miami, Fl. 33157	<u> </u>	TITLE	*	6/20/02	
NAME STREET ADDRESS	Secretary Elisa Herrera		NAME STREET ADDRESS		7 100 103	
CITY-ST-ZIP	0240 0 77 44 01 145-11 77 224.05		CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Saul Ulloa 11360 S.W. 160 Ave.			IN TI	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-		TITLE NAME STREET ADDRESS CHY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		TITLE 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 on an attachment with an address, with all other like empowered.

305–860–2599

SIGNATURE: DIGA AWUAPARA Olga Awuapara 6 - 18 - 03 - 305 860 9599