## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N95000005709

Entity Name: MINISTERIO DE METAFISICA UNIVERSAL, INC.

FILED Feb 11, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
12370 QUA MIAMI, FL	AIL ROOSTD 33177	R					
Current Mailing Address:				New Mailing Address:			
PO BOX 8: MIAMI, FL							
FEI Number: 65-0709258 FEI Number Applied For() FE			FEI Nur	El Number Not Applicable ( ) Certificate of Status Desired ( )			
Name and	Address of	Current Registered Agent:		Name and	Address of	f New Registered Agent:	
	D, DARITZA 108 AVE AP 33176	Г А-212					
	named entity e of Florida	submits this statement for the	purpose c	of changing i	ts registered	d office or registered agent, or both,	
SIGNATUF							
	Electro	nic Signature of Registered Ag	ent			Date	
OFFICERS AND DIRECTORS:				ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	SANTIAGO, D	8 AVE APT A-212		Title: Name: Address: City-St-Zip:	SANTIAGO, I	180 AVE. #287	
Title: Name: Address: City-St-Zip:	CARTAGENA,	TH ST APT B-205		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	FELICIANO, À	8 ST, APT A-214		Title: Name: Address: City-St-Zip:	FELICIANO,	(X) Change ( ) Addition ANGELA M DELETE 88 ST, APT A-214 3176	
Title: Name: Address: City-St-Zip:	D ( CARTAGENA, 8000 BAYSHO MIAMI, FL 33	DRE CT #110		Title: Name: Address: City-St-Zip:	CARTAGENA	(X) Change()Addition A, TAINEE DELETE HORE CT #110 3138	
Title: Name: Address: City-St-Zip:	D ( NIEVES, JUAN 8325 S.W. 10 MIAMI, FL 33	7 AVE APT D		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D ( SANTANA, EF 8440 SW 107 MIAMI, FL 33	AVE APT 110		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DARITZA SANTIAGO P 02/11/2003

ISMAEL PAGAN, DIRECTOR 19800 S.W. 180AVE #287 MIAMI, FL. 33187

MICHELLE CARTAGENA, DIRECTOR 21974 S.W. 125 AVE MIAMI, FL. 33170