## DOCUMENT # N9700000351

200 UI	03 NOT-FOR-PR NIFORM BUSIN	FILED Aug 25, 2003 8:00 am								
DOCUMENT # N9700000351  1. Entity Name						Aug 25, 2003 8:00 am Secretary of State				
Logia M <i>i</i> On,	ANSONICA FRANCISCO V. /	GUILER	RA, CORPORATI				08-25-2003 900	098 047 ****	61.25	
Principal Place of Business 500 WEST 29TH STREET HIALEAH FL 33010		600 W	Mailing Address 600 WEST 29TH STREET HIALEAH FL 33010				:111 +4844 88144 89141 38144 8	<b>a</b> ll <b>ab</b> li <b>86</b> (46 15) <b>6</b> 1	<b>0</b> 1281 1181 1854	
2. Principal Place of Business		<b>3.</b> Ma	3. Mailing Address							
Suite, Apt. #, etc.		Sı	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		Ci	ity & State			03 0171300		Applied For Not Applicable	7	
Zip Country		Zip		Count	ry	5. Certificate of Status Desired Sa.75 Additional Fee Required				1
6. Name and Address of Current Registered Agent					Name	7. Name and Address of New Registered Agent				
HERNANDEZ, RÉINALDO 600 WEST 29TH STREET					معهومته ومراهد بعيه مين	iress (P.O. Box Number is Not Acceptable)				
HIALEAH FL 33010					City FL Zip Code					
SIGNATURE	Signature, typed or printed name of registered ager	t and title if app			gent signature required			DATE	· · · · · · · · · · · · · · · · · · ·	
	FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be \$	236.25	9. Election Cam Trust Fund Co			\$5.00 May Be Added to Fees		heck Payable epartment of		
10.	OFFICERS AND D	RECTORS		11.		ADDITIONS/CHANG	ES TO OFFICERS AN			] =
itle Iame Street address Sity-St-Zip	DP HERNANDEZ, RENNALDO 600 WEST 29TH STREET HIALEAH FL 33010		☐ Delete	TITLE NAME STREET A CITY-ST	ADDRESS - Zip			☐ Change	☐ Addition	DE037 (4/0/
ITLE IAME STREET ADDRESS SITY-ST-ZIP	DT HERNANDEZ, REINALDO		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition	à
ITLE ENAME TREET ADDRESS OTY-ST-ZIP	DS RODRIGUEZ, FRANCISCO 600 WEST 29TH STREET		□ Delete	TITLE	ADDRESS	€ سودي. ومدسم	٠	Change	☐ Addition	<del> </del>
ITLE IAME ITREET ADDRESS	HIALEAH FL 33010  DT Delete BARRETO, PEDRO 600 WEST 29TH ST		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition	•
ITLE IAME TREET ADDRESS	HIALEAH FL 33010		☐ Delete	TITLE NAME STREET A	ADDRESS			☐ Change	Addition	
ITY-ST-ZIP ITLE AME			☐ Delete	CITY-ST- TITLE NAME	- 4114			☐ Change	☐ Addition	

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP