2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00000004253

Mailing Address

16252 S.W. 55TH ST

MIAMI FL 33185-6

3. Mailing Address

1. Entity Name

YES AMERICA, INC.

Principal Place of Business

16252 S.W. 55TH ST

MIAM! FL 33185-6



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90203 002 *****8.75 01-08-2003 90203 001 ***150.00

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	 		PINIO 14801 &1188 1911 1811

2. Principal Place of Bus	ace of Business SW 5511 ST 3. Mailing Address 4748 SW 56th ST								
Suite, Apt. #, etc. Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES						
City & State	City & State City & State		, SloriDA		4. FE	4. FEI Number 65-0980352		Applied For Not Applicable	
Zip	Country	Zip 33/85	Con	untry USA			□ <u>È</u> e∈	.75 Addition	onal
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O. INAII	ile and Address of Carren	<u> </u>		Name					1
ROMERO, YOLAND	A			Street Addres	s (P.O. Bo	x Number is Not Acceptable)			
16252 S.W. 55TH S									
MIAMI FL 33185-6									
				City		-	FL	Zip Code	
				level office or regio	tored age	ent, or both, in the State of Florida	a. I am fan	niliar with, ar	nd accept
The above named er the obligations of reg	ntity submits this statement	for the purpose of cha	inging its regisi	ered office of regis	siered age	ant, or board in the breeze			
the obligations of reg	gistered agent.					1-3	-03 DATE		
SIGNATURE	ped or printed name of registered age	nt and title if annlicable	(NOTE: Regis	tered Agent signature requ	uired when rei	nstating)	DATE		
Signature, ty	ped or printed name or registered age	it all the ii appropria.							
FILE NOV	VIII FEE IS \$150.00				ľ	9. Election Campaign Finan	cing	\$5.00 Added t	May Be
After May 1,	2003 Fee will be \$550.0	of State				Trust Fund Contribution.		Audeu	01000
Make Check Payable	to Florida Department				ADI	DITIONS/CHANGES TO OFFICE	ERS AND C	IRECTORS	IN 11
10.	OFFICERS AN	D DIRECTORS		TITLE				Change	Addition
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	L 33185-6			CITY-ST-ZIP					
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	S.W. 55TH ST			STREET ADDRESS					
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CITY-ST-ZIP		We also filling doop no	t qualify for the		in Section	119.07(3)(i), Florida Statutes. I	further cert	fy that the ir	nformation

12. Thereby 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 607, 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:

1-3-03