

FILED
Jun 30, 2002 8:00 am
Secretary of State

05-21-2002 90886 007 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P00000005272 ✓
 1. Entity Name
Totica's Art Gallery, Inc

DO NOT WRITE IN THIS SPACE

95457

2. Principal Place of Business <u>12624 Sw</u> Suite, Apt. #, etc. <u>77 Avenue</u> City & State <u>Miami</u> Zip <u>33156</u> Country <u>USA</u>	3. Mailing Address <u>12624 Sw</u> Suite, Apt. #, etc. <u>77 Ave</u> City & State <u>Mia</u> Zip <u>33156 FL</u> Country <u>USA</u>
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DO NOT WRITE IN THIS SPACE

4. FEI Number <u>650978373</u>	Applied For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**DO NOT WRITE
 IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name <u>ANTONIO N. ARROYO</u>
Street Address (P.O. Box Number is Not Acceptable) <u>3301 PONCE DE LEON BLVD # 210</u>
City <u>CORAL GABLES</u> FL Zip, Cont. <u>33134</u>

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE Glady's Superlano Antonio N. Arroyo, 04/29/02
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	January 1 - May 1: Fee is \$150.00 After May 1: Fee is \$550.00 Amended UBR is \$81.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D Superlano Glady's</u> <u>12624 Sw 77 Ave</u> <u>Mia, FL 33156</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>D Santaella Eduardo</u> <u>12624 Sw 77 Ave</u> <u>Mia, FL 33156</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like information covered.

SIGNATURE: Glady's Superlano (Glady's Superlano) 04/29/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)