2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000014900

Entity Name: CENTURY DORAL CORP.

FILED Apr 05, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7270 NW 12 STREET SUITE 410 MIAMI, FL 33126 **New Mailing Address: Current Mailing Address:** 7270 NW 12 STREET SUITE 410 MIAMI, FL 33126 FEI Number: 65-0980675 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ALBA-REILLY, KEYLA 7270 NW 12 STREET SUITE 410 MIAMI, FL 33126 US 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: Electronic Signature of Registered Agent Date This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition RABELL, LUIS JANZ, MARK Name: Name: 7270 NW 12 STREET 7270 NW 12 STREET, SUITE 410 Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: MIAMI, FL 33126 DP Title: Title: (X) Delete () Change () Addition Name: RABELL, LUIS Name: 7270 NW 12 ST, STE 410 Address: Address: MIAMI, FL 33126 City-St-Zip: City-St-Zip: () Delete Title: Title: VSD () Change () Addition ALBA-REILLY, KEYLA Name: Name: 7270 NW 12 STREET Address: Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: Title: VTD (X) Delete Title: () Change () Addition NORRIS, WAYNE Name: Name: Address: 7270 NW 12 ST, STE 410 Address: City-St-Zip: MIAMI, FL 33126 City-St-Zip: Title: VD Title: () Delete () Change () Addition LLANO, CESAR Name: Name: 7270 NW 12 ST. STE 410 Address: Address: MIAMI, FL 33126 City-St-Zip: City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KEYLA ALBA-REILLY VSD 04/05/2002