FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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66	NERAL SE	RVICES FOR	400	/NC	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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130	pal Place of Business	ERS 3. Mailing Address	0.0	0.E		
	Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPAC	ne ne
mi	City & State MI AMI FL City & State				4 FFI Number	
33	3196 Country A Zip		Country		5. Certificate of Status Desired ★ \$8.	Not Applicable 75 Additional
				Name CC	Fee I Name and Address of Current Registered Age	Dogućena 1
				PINOSA, ULISES 6 2.0. Box Number is Not Acceptable)		
13028				SW 88th TER S		
8. The abo	eve named entity submits this st	atement for the purpose of changing i	ts registere	City MA	M/ FL Z	D Code 3/86
8. This 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 Signature: typed or printed name of registered agent and life if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
; e. mis con	poration is eligible to setisfy to	Internal State Sta	TE: Registered	Agent signature required wh	en reinstatung) DATE	
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11.	OFFICE	Make Check Paya ERS AND DIRECTORS	DIE to Del	partment of State	C.i /	Added to Fees
NAME	ESPINOZA, L	ILISES 6	int			
STREET ADDRESS CITY-ST-ZIP	13028 SW MIAM, F	BOTH TEN S		ACORESS	800008578; 10/24/0201103002 **	178 158,75
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STREET ADDRESS CITY-ST-ZIP			NAME STREET AL		IN THIS SPACE	
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TITLE NAME			CITY-ST-Z	IP .	Missola	
STREET ADDRESS CITY-ST-ZIP			nave Street add	RESS	7	
13. I hereby ce indicated or of the core	rtify that the information supplie in this report or supplemental	with this filing does not qualify for the populs true and accurate and that	CHY-SI-7	n stated in Section 1	19.07(3)(i), Florida Statutas 16 (#ba-	
13. I hereby certify that the information supplied with this lying does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 SIGNATURE.						
SIGNATURE: UUSE G. GPNOZA 10/21/02 /786)412-0812						
Date / Dayung Phone /						

Miami, October 22, 2002

Florida Department of State Division of Corporations P O Box 6327 Tallahassee, FL 32314

To Whom It May Concern:

I am sending a check in the amount of \$158.75 for the Uniform Business Report of General Services For You Inc for the year 2002 plus a request of a certificate of status.

Kindly accept my filing at this time because I never received the Uniform Business Report forms or notices. As you can see I have to file using a blank form, and I hope you can accept my request to abate any penalty.

Very truly yours,

Ulises of Espiroza

President