

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000028089

FILED  
Apr 30, 2002 8:00 AM  
Secretary of State

Entity Name: NEWFIELDPRICE, INC.

## Current Principal Place of Business:

340 NW 99TH WAY  
PEMBROKE PINES, FL 33024

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 310578  
MIAMI, FL 33231

## New Mailing Address:

FEI Number: 65-0991914

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Title: PSD ( ) Delete  
Name: SOTO, DORA P  
Address: 340 NW 99 WAY  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: CEO ( ) Delete  
Name: MANFREDI, LUDOVICO  
Address: 201 CRANDON BLVD #131  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: TD ( ) Delete  
Name: RODRIGUEZ, JORGE L  
Address: 1401 BRICKELL AVENUE SUITE 332  
City-St-Zip: MIAMI, F; 33131

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DORA SOTO

P

04/30/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date