

FILED
Jul 01, 2003 8:00 am
Secretary of State

07-01-2003 90041 039 ***158.75

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000036931

1. Entity Name

ALLANEY INC.



DO NOT WRITE IN THIS SPACE

90140558

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2291 NW 82 AVE

Suite, Apt. #, etc.

3. Mailing Address

2291 NW 82 AVE

Suite, Apt. #, etc.

City & State
MIAMI, FL

City & State
MIAMI, FL

4. FEI Number
65-1014495

Applied For
Not Applicable

Zip
33122

Country

Zip
33122

Country

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name MENDOZA, IÑAKI

Street Address (P.O. Box Number is Not Acceptable)

9805 NW 52 STREET #516

City MIAMI

FL

Zip Code
33178

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when terminating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PTD
MENDOZA, IÑAKI
9805 NW 52 STREET #516, MIAMI, FL 33178

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VP
LONDONO, CATALINA
2289 NW 82 AVE., MIAMI, FL 33122

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
S
ESPINOZA, ADRIANA
2289 NW 82 AVE., MIAMI, FL 33122

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DO NOT WRITE IN THIS SPACE

12. I hereby 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Catalina Londono

Catalina Londono

06/21/03

305-244-5856

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)



Accounting & Tax Service, Inc.

Attachment
90140558

June 20, 2003

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

Re: ALLANEY, INC.

Document no. **P00000036931**

2003 Annual-Uniform Business Report

Dear Sir or Madam:

Enclosed please find:

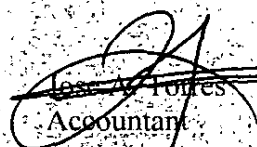
- 1) Original Corporation Reinstatement Report
- 2) A check payable to the Department of State in the amount of \$158.75

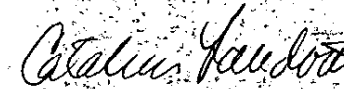
We are respectfully requesting abatement of the penalties since the above corporation had move from the previous address (1444 NW 82ND Avenue, Miami FL 33126) and when it was time to file the report did not received the forms.

Please review the above circumstance and abate the penalty of the reinstatement fee. Ms. Londoño has made a commitment to make the payment of renewal timely now and in the future, and notify the Division of Corporation of any change that will occur.

We have thank you in advance for your cooperation in this matter and ask, if you need additional information do not hesitate to call or contact us at your earliest convenience.

Sincerely,


Jose A. Torres
Accountant


Catalina Londoño
Vice-President