FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000043265

MANUEL F. HERRERA, P.A.



03 MAR - 7 PM 2: 43

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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Suite. April vi etc. City & State City & State												
City & State Miami, FI Country 2D Country S. Certificate of Status Desired \$8.75 Additional Fee Required Fee Require							DO NOT WRITE IN THIS SPACE					
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Section Sect			City & State			4.	FEI Number 65-10032	30	 			
DO NOT WRITE IN THIS SPACE 7. Name and Address of Current Registered Agent Name	·····						03-10032			able		
Name Manuel F. Herrera			Zip	Γ¥	5.	Certificate of Status Desire	đ 🗆					
Since Address (P.O. Box Number is Not Acceptable)						7. N	7. Name and Address of Current Registered Agent					
2684 S.W. 137 Ave. City Miami FL 230 Code 33175 8. The above named Antly Storter in attainment for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar with, and accept the obligations of the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am tamiliar with, and accept the obligations of the purpose of changing its registered agent, or both, in the State of Florida. I am tamiliar with, and accept the obligations of the purpose of changing its registered agent, or both, in the State of Florida. I am tamiliar with, and accept the obligation of the purpose of changing its registered agent, or both, in the State of Florida. I am tamiliar with, and accept the obligation of the State of Florida. I am tamiliar with, and accept the obligation of the State of Florida. I am tamiliar with, and accept the obligation of the State of Florida. I am tamiliar with, and accept the obligation of the State of Florida. I am tamiliar with, and accept the obligation of the State of Florida. I am tamiliar with, and accept the obligation of Florida. I am tamiliar with, and accept the obligation of Florida. I am tamiliar with, and accept the obligation of Florida. I am tamiliar with, and accept the obligation of Florida. I am tamiliar with, and accept the obligation of Florida. MAINTER ADDRESS State of Florida. State of Florida.					Manuel F. Herrera							
City Miami FL Zip Code 33175 8. The above named entry from the statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Lan familiar with, and accept the obligations of legisle godystem. SIGNATURE Signature	•		Street Address			(P.O. Box Number is Not Acceptable)						
8. The above named factly start when statement for the purpose of changing its registered agent, or both, in the State of Florida, I am familiar with, and accept the obligations of Registe of Agents (Assets agents). M.	/IN THIS SPACE				2684 S.W. 137 Ave.							
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SIGNATURE	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											
SIGNATURE State Name Proportion State State Name State State Name State Name State Name State Name Na	the obligation	ons of registered agent.										
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Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-S		After May 1, Fee is \$550.00										
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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]											
	12. Thereby c	ertify that the information supplied with	this filing does not qualify for	r the exer	mption state	ed in Section	n 119.07(3)(i), Florida Statut	es. I further ce	rtify that the information	on		

2. Thereby certify that the information supplied with this limit does not quality to the exemption stated in section 179.07(3)(). Florida Statutes, and that I am an officer or directo 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 governing the propriet of the corporation of the corporation

SIGNATURE

M. Baldw

03/05/2003

786-281-6809

Date

Daytime Phone #