

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2002 8:00 am**  
**Secretary of State**

02-05-2002 90056 001 \*\*\*150.00

UBR100  
 AV

**DOCUMENT # P00000057361**  
 1. Entity Name  
**MOTOR BOAT MOTOR BOAT, INC.**

Principal Place of Business      Mailing Address  
**650 NE 55TH STREET**      **650 NE 55TH STREET**  
**MIAMI FL 33137**      **MIAMI FL 33137**

2. Principal Place of Business      3. Mailing Address  
**1275 WEST 36 ST.**      **1275 WEST 36 ST**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**APT. 202**      **APT. 202**  
 City & State      City & State  
**HALEAH, FLORIDA**      **HALEAH FLORIDA**

4. FEI Number      Applied For  
**65-1016168**      Not Applicable

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



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**ORTEGA, GUSTAVO LUIS**  
**650 NE 55TH STREET**  
**MIAMI FL 33137**

7. Name and Address of New Registered Agent  
 Name      **ORTEGA, GUSTAVO LUIS**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1275 WEST 36 STREET**  
**APT. 202**  
 City      **HALEAH**      FL      Zip Code      **33012**

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.  
 SIGNATURE *Gustavo Ortega*      DATE **1-16-02**  
Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	ORTEGA, GUSTAVO LUIS	650 NE 55TH STREET	MIAMI FL 33137	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D	ORTEGA, GUSTAVO LUIS	1275 WEST 36 STREET, APT. 202	HALEAH, FL 33012	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gustavo Ortega*      DATE **1-16-02**      DAYTIME PHONE # **(786)4127552**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/01)