

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Sep 12, 2001 08:00 AM
Secretary of State

DOCUMENT # P0000058573

1. Entity Name
LANCO & HARRIS CORP.

Principal Place of Business		Mailing Address	
5883 NW 37 AVENUE		5883 NW 37 AVENUE	
MIAMI 33142	US	FL	MIAMI 33142
			US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State

DO NOT WRITE IN THIS SPACE

Zip	Country	Zip	Country
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4. FEI Number	Applied For
65-1121594	<input type="checkbox"/> Not Applicable

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

6. Name and Address of Current Registered Agent

BLANCO MARIANA C
100 S.E. 2ND STREET
18TH FLOOR
MIAMI FL
33131 US

7. Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 City **FL** Zip Code _____

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 **BLANCO, MARIANA C** **09/12/2001**
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, 2001 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	TD	<input type="checkbox"/> Delete	
NAME	BLANCO GUILLERMO		
STREET ADDRESS	5883 NW 37 AVENUE		
CITY-ST-ZIP	MIAMI FL 33142		
TITLE	SD	<input type="checkbox"/> Delete	
NAME	BLANCO SERGIO		
STREET ADDRESS	5883 NW 37 AVENUE		
CITY-ST-ZIP	MIAMI FL 33142		
TITLE	VPD	<input type="checkbox"/> Delete	
NAME	BLANCO EDUARDO		
STREET ADDRESS	5883 NW 37 AVENUE		
CITY-ST-ZIP	MIAMI FL 33142		
TITLE	PD	<input type="checkbox"/> Delete	
NAME	BLANCO ENRIQUE		
STREET ADDRESS	5883 NW 37 AVENUE		
CITY-ST-ZIP	MIAMI FL 33142		
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete	
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

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: **BLANCO GUILLERMO** **TD** **09/12/2001**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/00)