

**FILED**  
**Jun 17, 2003 8:00 am**  
**Secretary of State**

06-17-2003 90025 034 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
 UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT # P00000063781</b> 1. Entity Name <b>EUREKA CREEK, INC.</b>					
Principal Place of Business <b>150 ALHAMBRA CIRCLE                  SUITE 800                  CORAL GABLES, FL 33134</b>		Mailing Address <b>150 ALHAMBRA CIRCLE                  SUITE 800                  CORAL GABLES, FL 33134</b>			
2. Principal Place of Business <b>201 Alhambra Circle</b> Suite, Apt. #, etc. <b>Suite 901</b> City & State <b>Coral Gables FL</b> Zip <b>33134</b>		3. Mailing Address <b>201 Alhambra Circle</b> Suite, Apt. #, etc. <b>Suite 901</b> City & State <b>Coral Gables FL</b> Zip <b>33134</b>		4. FEI Number <b>65-1028684</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		<input type="checkbox"/> CHECK HERE IF MAKING CHANGES			
6. Name and Address of Current Registered Agent <b>GRAVIER, LEONARDO D                  150 ALHAMBRA CIRCLE                  SUITE 800                  CORAL GABLES, FL 33134</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent's signature required when substituting) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE <b>PSTD</b> NAME <b>VAZQUEZ, JOSE L</b> STREET ADDRESS <b>150 ALHAMBRA CIRCLE SUITE 800</b> CITY-ST-ZIP <b>CORAL GABLES, FL 33134</b>	<input type="checkbox"/> Delete		TITLE <b>Vice President</b> NAME <b>Horacio L.A. Alvares</b> STREET ADDRESS <b>4779 Collins Ave. # 2704</b> CITY-ST-ZIP <b>Miami Beach, FL 33140</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Jose L. Vazquez</u> <u>6/27/03</u> <u>305-446-3177</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

90139907



CR2034 (10/02)

Attachment  
90139907.  
P00000063781

June 10, 2003

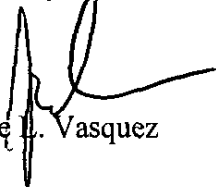
Florida Department of State Division of Corporation  
Uniform Business Report  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Eureka Creek, Inc

To Whom It May Concern:

Enclosed please find the Uniform Business Report for Eureka Creek, Inc. This report had been sent previously but was never received by your office. As per our phone conversation I am requesting the late fee to be waived because the original must have been lost in the mail.

Thank you in advance,



Jose L. Vasquez