

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

DOCUMENT # *P00000067485*

1. Entity Name

*B & I Professional Services, Inc.*

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 APR -8 AM 11:37

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

*19214 NW 91 ct*

3. Mailing Address

*19214 NW 91 ct*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

*Miami, FL*

City & State

*Miami, FL*

4. FEI Number

*65-1024760*

Applied For

Not Applicable

Zip

*33018*

Country

*US*

Zip

*33018*

Country

*US*

5. Certificate of Status Desired

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

*UP*

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

*Boris Abel Rodriguez*

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

*19214 NW 91 ct*

City

*Miami*

FL

Zip Code

*33018*

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

*Boris A. Rodriguez*

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

(NOTE: Registered Agent signature required when registering)

*4/4/03*

DATE

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

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
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

*President*

NAME

*Boris Abel Rodriguez*

STREET ADDRESS

*19214 NW 91 ct*

CITY - ST - ZIP

*Miami, FL 33018*

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

200016322702  
04/18/03--01041--015 \*\*\*500.00

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*Boris A. Rodriguez*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/4/03*

*(352) 887-0056*

Daytime Phone #

# **B & I PROFESSIONAL SERVICES, INC.**

TO WHOM IT MAY CONCERN:  
TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE FOR 2001 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT .

CORDIALLY



BORIS ABEL RODRIGUEZ  
PRESIDENT