FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 28, 2002 8:00 am Secretary of State

DOCUMENT # P0000069304 1. Entity Name					05-28-2002 91754 031 ***150.00			
BUSHIDO HOUSE, INC.								
DO NOT WRITE	IN THIS SP	ACE						
2. Principal Place of Business	3. Mailing Address		<u> </u>	. *				
1546 41st AVE. P.O. BOX 358			33					
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS SPACE			
City & State					4. FEI Number Applied For			
VERO BEACH FL Zip Country		VERO BEACH, FL Zip Country			-1101952	\$8	Not Applicable 75 Additional	
Zip Country 32960	32964	Country			Certificate of Status Desired	Fee I	Required	
Secretary and Secretary and Secretary	Sanda Sanda Sanda Sanda			7. Na	me and Address of Current Registe	red Age	ent	
A CONTRACTOR AND CONTRACTOR OF THE PROPERTY OF			POSA	DA, JI	UAN			
DO NOT WRITE Street A 1546				dress (P.O. 41st	Box Number is Not Acceptable) AVENUE			
IN THIS SP	ACE		1010	3100	11121102			
		, . ,	City			. Zir	Code	
	*		VÉRO	BEAC			2964	
8. The above named entity submits this stateme	nt for the purpose of chang	ing its reg	istered offic	ce or registe	ered agent, or both, in the State of Flo	rida.		
SIGNATURESignature, typed or printed name of regis	stered agent and title if applicat	ole. (N	IOTE: Regist	ered Agent si	gnature required when reinstating)	<u>_</u>	ÄTE	
								
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) After May 1, Fee is \$51.2 After May 1, Fee is \$51.2 Amended UBR is \$61.2 Make Check Payable to Department			is \$550.00 is \$61.25		10. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	
11. OFFICERS AND	DIRECTORS		1. 2	7		Y 1		
TITLE PSTD		TITLE		• . • •			CR2E034B (12/01)	
NAME POSADA, JUAN			ET ADDRESS	*			·	
	et ADDRESS 1546 41st AVENUE -st-zip VERO BEACH, FL 32960					*		
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NAME								
STREET ADDRESS			ET ADDRESS ST - ZIP			, ⁽² , 3)		
13. I hereby certify that the information supplied y	vith this filing does not quali	fy for the	exemption	stated in Se	ction 119.07(3)(i), Florida Statutes. I	urther c	ertify that the	
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 of 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.								
		AUL		POSADA	A 05/01/02 7	72_1	569-1121	
SIGNATURE: fluit	D DOWNER ALLE OF CICKING	OUAL	V C.		Dota Da	ر کر برانم Dh	202 <u>1121</u>	