

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 21, 2003 8:00 am
Secretary of State

0175081 AV

05-21-2003 90080 022 ***150.00

DOCUMENT # P00000084583

1. Entity Name
PUIG PROPERTIES, INC.



Principal Place of Business
**21345 SW 244TH STREET
HOMESTEAD FL 33031**

Mailing Address
**21345 SW 244TH STREET
HOMESTEAD FL 33031**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-1045529**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PUIG, ODALYS
21345 SW 244TH STREET
HOMESTEAD FL 33031**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) 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. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D <input type="checkbox"/> Delete
NAME	PUIG, ODALYS
STREET ADDRESS	21345 SW 244TH STREET
CITY-ST-ZIP	HOMESTEAD FL 33031
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
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STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: **Odalys Puig**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **5-16-03** Daytime Phone #: **(305) 246-5595**

CR2E034 (10/02)

Attachment

Alejandro Raimundez, P.A. 90136929

CERTIFIED PUBLIC ACCOUNTANTS

3134 CORAL WAY
MIAMI, FLORIDA 33145

ALEJANDRO RAIMUNDEZ, C.P.A.

JOSEFINA RAIMUNDEZ, C.P.A.

TEL: (305) 461-1331

FAX: (305) 446-8404

May 15, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee FL 32302-1500

RE: Puig Properties, Inc.

P00000084583

Dear Sir or Madam:

Enclosed please find the 2003 Uniform Business Report for the above company, along with a check in the amount of \$150.00.

Puig Properties, Inc. is late in submitting this and should be paying \$550, but are asking for abatement on the penalty of \$400.

Puig Properties, Inc. and Mr. & Mrs. Puig, the owners, have been under very serious financial problems, to the point of consulting an attorney about filing for bankruptcy. It would be very helpful if you could accept the \$150 as valid payment and renew the corporation for 2003.

Thank you for your attention to this matter.

Very truly yours,



Alejandro Raimundez
Certified Public Accountant

Odalys Puig
President, Puig Properties Inc.