

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000088718

FILED  
May 01, 2002 8:00 AM  
Secretary of State

**Entity Name:** LATIN CONEXION, REFERRAL SERVICE CORP.

**Current Principal Place of Business:**

10793 SW 6ST #1  
MIAMI, FL 33174

**New Principal Place of Business:**

5842 SW 144 CRL PL  
MIAMI, FL 33183

**Current Mailing Address:**

5842 SW 144TH PL  
MIAMI, FL 33183

**New Mailing Address:**

**FEI Number:** 65-1041704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PEREZ, NAPOLEON  
10793 SW 6ST #1  
MIAMI, FL 33174

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: PEREZ, NAPOLEON  
Address: 10793 SW 6ST #1  
City-St-Zip: MIAMI, FL 33174

Title: V ( ) Delete  
Name: L. RUIZ, MARIA  
Address: 10793 SW 6ST #1  
City-St-Zip: MIAMI, FL 33174

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: PEREZ, NAPOLEON  
Address: 5842 SW 144 CRL PL  
City-St-Zip: MIAMI, FL 33183

Title: V (X) Change ( ) Addition  
Name: L. RUIZ, MARIA  
Address: 5842 SW 144 CRL PL  
City-St-Zip: MIAMI, FL 33183

Title: M ( ) Change (X) Addition  
Name: RAMOS, NOELIA M  
Address: 5842 SW 144 CRL PL  
City-St-Zip: MIAMI, FL 33183

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NAPOLEON PEREZ

P

05/01/2002

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date