APR-30-2002 01:07 AM SILVA'S_ENTERPRISE 31

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 27, 2002 8:00 am**
**Secretary of State**
05-27-2002 90437 033 ***150.00

DOCUMENT # P00000095231
Entity Name

Balboa & Balboas

Principal Place of Business
15540 SW 80 St
Suite 103
Miami FL 33193

Mailing Address
16300 NE 19 AVENUE SUITE 100
NORTH MIAMI BEACH FL 33162

[redacted]

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 15540 SW 80 St | 15540 SW 80 St |
| Suite, Apt. #, etc. Suite 103 | Suite, Apt. #, etc. Suite 103 |
| City & State MIAMI FL | City & State MIAMI FL |
| Zip 33193 Country USA | Zip 33193 Country USA |

4. FEI Number 59-1839119 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| SILVA, FERNANDO<br>16300 NE 19 AVENUE SUITE 100<br>NORTH MIAMI BEACH FL 33162 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City FL Zip Code |

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 [signature] 4/29/02
(Required. Typed or printed name of registered agent and title if applicable. If new registered agent signature required when mailing.) DATE

☐ This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2002 Fee will be $550.00**
**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 | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |
|---|---|
| TITLE PD ☐ Delete<br>NAME Joan P. Pardo<br>STREET ADDRESS 6340 SW 79 St suite 24<br>CITY-ST-ZIP Miami FL 33143 | TITLE ☐ Change ☐ Addition<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |
| TITLE V.P. ☐ Delete<br>NAME Hernando Pardo<br>STREET ADDRESS 15540 SW 80 St suite 103<br>CITY-ST-ZIP Miami FL 33193 | TITLE ☐ Change ☐ Addition<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |
| TITLE ☐ Delete<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TITLE ☐ Change ☐ Addition<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |
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CR2E134 (9/01)

I hereby certify that the information indicated with this filing above and specifically for the purposes 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 4/29/02 305 8070 4124
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #