

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

02 OCT 21 PM 3:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000101735

1. Entity Name

LEAFAR INVESTMENTS CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7900 S ORANGE BLOSSOM TRL

3. Mailing Address

VLN 1460

Suite, Apt. #, etc.

Suite, Apt. #, etc.

UNIT 2093

P O BOX 025685

City & State

City & State

ORLANDO, FL

MIAMI

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-1068386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOAQUIN A. ALEMANY

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

901 PONCE DE LEON BLVD

SUITE 305

City

CORAL GABLES

FL

Zip Code

33134

DO NOT WRITE
IN THIS SPACE

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

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

(NOTE: Registered Agent signature required when reinstating):

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 D
NAME RAFAEL LOAIZA
STREET ADDRESS 901 PONCE DE LEON BLVD #305
CITY - ST - ZIP CORAL GABLES, FL 33134

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

300008567393
10/24/02--01054--017 **550.00

TITLE D
NAME LUISA DEL VALLE-VARGAS
STREET ADDRESS 901 PONCE DE LEON BLVD #305
CITY - ST - ZIP CORAL GABLES, FL 33134

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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:

RAFAEL LOAIZA, DIRECTOR

(58-241) 842-9061

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/21/02

DK SHELLEY, INC.

910 Trumpeters Court E.

Monument, CO 80132

FEIN: 84-1597850

October 17, 2002

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

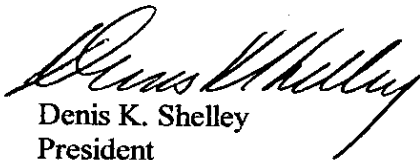
To Whom It May Concern:

Enclosed is the form that I understand is required to reinstate DK Shelley, Inc. a Colorado corporation to transact business in Florida. An insurance company discovered that Florida has revoked the corporation due to failure to file the required Uniform Business Report as of May 1, 2002 and informed me. I am not sure why the required UBR was not filed properly but I don't believe that our home office (at the above address) ever received the report to file.

I have included the required \$150 filing fee plus the additional \$400 for the penalty for not filing by May 1, 2002. I feel the additional \$400 should not be charged because I did not receive the filing form from Florida. However, I've included the \$400 so as not to delay the reinstatement. If you determine that I should not have had to pay the additional \$400 because the form was originally sent to an incorrect address and not forwarded to me, please refund the money.

Please contact me on 719-570-0985 if you have any questions. I would appreciate it if you could ensure the mailing address for future forms is changed to the address above so this situation does not reoccur in the future.

Sincerely,



Denis K. Shelley
President