

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90100 011 ***150.00

DOCUMENT # 100000109649

1. Entity Name

Gilberto y Julian de los Rios & Comp

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

3684 Pine Hurst Dr #1 3684 Pine Hurst Dr #1

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Lake Worth, FL

Lake Worth, FL

Zip

Country

Zip

Country

33467

33467

4. FEI Number

65-1059578

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Gilberto de los Rios

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

11470 NW 4th Lane

City

Miami

FL

Zip

33172

8. The above named party submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Gilberto de los Rios

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

(NOTE: Registered Agent signature required when reinstating)

2/1/03

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 \$81.25

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	<u>President</u>
NAME	<u>De. los Rios, Gilberto</u>
STREET ADDRESS	<u>11470 NW 4th Lane</u>
CITY - ST - ZIP	<u>Miami, FL 33172</u>
TITLE	<u>Vicepresident</u>
NAME	<u>De los Rios, Julian</u>
STREET ADDRESS	<u>11470 NW 4th Lane</u>
CITY - ST - ZIP	<u>Miami, FL 33172</u>
TITLE	
NAME	
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CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

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:

Gilberto de los Rios

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/03

Date

Daytime Phone

CR2E034B (12/01)