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

DOCUMENT # P01000009331
1. Entity Name

SIGNATURE: \_\_



## FILED

DO NOT WRITE IN THIS SPACE  2. Principal Place of Business 10/70 SW 66 Avenue  3. Making Address P.O. Box 246351 Suite, Apt. #, etc.  City & State Pembroke Pines, Florida  Zio Country Jio Jio Country Jio Jio Jio Available Applied For Pembroke Pines, Florida  DO NOT WRITE  Country Jio Jio Jio Available Applied For Fee Required  7. Name and Address of Current Registered Agent Name Spiegel & Utrera, P.A.  Street Address (P.O. Box Number is Not Acceptable)  1840 Coral Way, 4th Floor  City & State Pembroke Pines, Florida  This SPACE  IN THIS SPACE  IN THIS SPACE  Name and Address of Current Registered Agent Name Spiegel & Utrera, P.A.  Street Address (P.O. Box Number is Not Acceptable)  1840 Coral Way, 4th Floor  City Miami  FL 33145  33145  Signature registered of Fee Required  Atter May 1, Fee is \$50.00 After May 1, Fee is \$50.00 After May 1, Fee is \$50.00 And Address (P.O. Box Number is Not Acceptable)  In This Space  Added to Fees Address (P.O. Box Number is Not Acceptable)  Atter May 1, Fee is \$50.00 Amended UBR is \$61.23  Address (P.O. Box Number is Not Acceptable)  Trust Fund Contribution.  Address (P.O. Box Number is Not Acceptable)  Trust Fund Contribution.  Signature registered Agent speaker in the Registered Agent speake	5
Suite, Apt. #, etc.  Suite, Ap	5
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City & State Pembroke Pines, Florida    Pembroke Pines, Florida   Pembroke Pines, Florida   Pembroke Pines, Florida   Pembroke Pines, Florida   Pembroke Pines, Florida   Applied For Not Applicable   Not Applicable   Not Applicable   Not Applicable   States   State	D
Pembroke Pines, Florida    Pembroke Pines, Florida   Pembroke Pines, F	
33023 United States 33024 United States 5. Certificate of Status Desired Fee Required Name Spiegel & Utrera, P.A.  Street Address (P.O. Box Number is Not Acceptable)  1840 Coral Way, 4th Floor  City Miami FL Zio Code 33145  8. The above named entity subprise translation for the purpose of changing its registered office or registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered spinal profilement agent and the Lappiccode.  Signature By:  Signature By:  Signature, treed or prediction from the purpose of changing its registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered spinal profilement agent and the Lappiccode.  Natalia Utrera, Vice President  Signature, treed or prediction from the purpose of changing its registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obligations of registered agent, or both, in the State of Florida I as familiar with, and accept the obl	
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Sirect Address (P.O. Box Number is Not Acceptable)  IN THIS SPACE  1840 Coral Way, 4th Floor  City Miami  FL Zio Code 33145  8. The above named entity subprife the sauthent for the purpose of changing its registered agent, or both, in the State of Florida 1 and familiar with, and accept the obligations of registered agent and the Lappicable.  SIGNATURE By  SIGNATURE By  January 1- May 1 FeVI \$150.00  After May 1, FeVI \$150	
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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 on an attachment with an address, with all other like empowered.	-

**Adam Duggins** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE ANNUAL REPORT LATE FEES

STATE OF FLORIDA		
COUNTY OF)		
1. Adam Duggins is the President of FUNK BOOGIE EXPRESS, INC., a Florida corporation, (hereinafter "Corporation").		
2. That the Corporation failed to file its 2004 Uniform Business Report or pay the 2004 Uniform Business Report filing fee within the time prescribed by Florida Statutes Chapter 607 because:		
	ling the Annual Report and pay the Annual of State, was never received by the	
3. The Corporation requests the Florida Department of State waive the late fee for the Corporation upon the payment by the Corporation of its 2004 Uniform Business Report filing fee, which are presented simultaneously with this Affidavit.		
4. FUNK BOOGIE EXPRESS, INC. satisfies the requirements of the Florida Statutes 607.0401.		
Dated Og day of March, 2004		
FURTHER, AFFIANT SAYETH NOT		
	FUNK BOOGIE EXPRESS, INC.	
ANN M. WANTUCK MY COMMISSION # DD 106157 EXPIRES: April 4, 2006 Bonded Thru Notary Public Underwriters	By: Adam Duggins, President	
	before me this day of Mr., 2004.	
	Notary Public, State of Florida at Large Printed Name:	
	Commission Expires:	