


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

APPROVAL
AND
FILED

03 AUG 22 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000011152
1. Entity Name
MIAMI 58 CORPORATION



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1313 Ponce de Leon Blvd.
Suite, Apt. #, etc.
200
City & State
Coral Gables, FL
Zip 33134 Country

3. Mailing Address
SAME
Suite, Apt. #, etc.
City & State

2003 AMENDED

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1076492
Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D TERESA JUELLE c/o G. Frank Quesada, Esq. 1313 Ponce de Leon Blvd. #200 Coral Gables, FL 33134	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100022206471 08/11/03--01021--007 **61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D SUSAN JUELLE c/o G. Frank Quesada, Esq. 1313 Ponce de Leon Blvd., #200 Coral Gables, FL 33134	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D JOSE A. JUELLE c/o G. Frank Quesada, Esq. 1313 Ponce de Leon Blvd. #200 Coral Gables, FL 33134	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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CR2E034B (12/02)

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.

SIGNATURE:  TERESA JUELLE 8/7/2003 (305) 446-2517

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #