

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # PO1000012800
1. Entity Name
Elio Rosa Furniture, Inc.

04-02 APR 26 PM 4:21
009 150.00

DO NOT WRITE IN THIS SPACE

B0054142

2. Principal Place of Business
9809 NW 80th Ave.
Suite, Apt. #, etc. Bay 9J
City & State Micahol boideus
Zip 33016 Country USA

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

4. FEI Number 65-1086661 Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name Eduardo Vega
Street Address (P.O. Box Number is Not Acceptable)
246 NW 32 Court
City MIAMI FL Zip Code 33125

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	<u>Eduardo Vega Sr</u> <u>President - Secretary</u> <u>246 NW 32, Ct Miami Fl 33125</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President - secretary</u> <u>Eduardo Vega</u> <u>246 N.W. 3 2 Crt. Miami Fl. 33129</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: [Signature] Date April 9, 2002 Daytime Phone # (305) 642-5202

CR2E034B (12/01)