## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: RICArdo Bravo

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

ONIFORM BOSINESS REPORT (ORK)					FII FN		
DOCUMENT # PO1000036204							
1. Entity Nar					02 DEC 30 AHIO: 20		
	CAYUS (	CORP				- <u>-</u> .	
					SECRE, LIY OF STATE		
-			,		TALLAH ASS	Pata PLOMDA	
	DO NOT WRITE	IN THIS SI	PAC	E .			
		•			20000	9739402	
Principal Place of Business					12/30/0201065005 **150.00		
4-\2_	5. Dixle Hwy.	DODOST38402  3. Mailing Actions 412 S. Dix're Huy.  State April etc.  City & State HALL and acte, Florida  Zip Social State  City & State HALL and acte, Florida  Zip Social State  City & State HALL and acte, Florida  Zip Social State  Accentify State  City & City & State  City & State  City & Ci					
Stite, Apt	to # . Cities	Suite, Apr. #, etc.				VRITE IN THIS SPACE	
City & Sta	indale, Florida		حيم }	Florid			
Zip	Country					\$9.75 Additional	
330					5. Certificate of Status Desire		
<u> </u>				Namo			
	DO NOT W	DITE	, ·	B			
•	DO NOT WRITE						
	IN THIS SP	ACE	ļ	10 3-1			
	•	÷	}	City		Zin Code	
				ร็บทุก	, Isles Beach	I FL POSSIGE	
8. The above	e named entity submits this statement for	the purpose of changing its	registeres	Leffice or regist	ered agent, or both, in the State o	l Florida.	
	D 2.	_ ( )!		) (	) _		
SICNATURE	Signotine, typed or printed name or registered agent a	O Jacob management of the mana	-	Apont stort-turo moun	od what prinstalion)		
					* I The state of t	OFFIC	
	oration is eligible to satisfy its Intangible requirement and elects to do so.				10. Election Campaign	Financing \$5.00 May B	
-	eria on back)					ution. Added to Fees	
11.	OFFICERS AND D	***************************************	10 10 00	Jartinoni Or Or	-		
TITLE	P.		THTLE	,	3		
NAME	Bravo, Ricard	10 M.	NAME		* a		
STREET ADDRESS	19390 collins	Ave, 915 A					
CITY-ST-ZIP		cu, Fl. 85160		I-ZIP			
TITLE NAME	٧.	el Rio					
STREET ADDRESS				ADDRESS		•	
CITY-ST-ZIP	sunny isue se	acu, F[. 33169	CITY+S	J-ZIP		•	
TITLE			THE				
NAME			NAME				
STREET ADDRESS						( WDITE	
CITY-ST-ZIP				T-ZIP	DO NO	AAIZIIE	
TITLE NAME				ŀ	IN THIS	SPACE	
STREET ADDRESS			1	ADDRESS			
CITY-ST-ZIP	Ì				•	-	
TITLE			TITLE		,		
NAME			NAME			*.	
STREET ADDRESS							
CITY-SI-ZIP		, , , , , , , , , , , , , , , , , , , ,		T- 7112			
TITLE	L-marine and a second a second and a second				•		
NAME STREET ADDRESS			NAME	ADDRESS	or grant of the second		
CITY-ST-ZIP			CITY-S				
13. Thereby o	certify that the information supplied with t	his filing does not qualify for	the execut	otion etated in C	ection 119 07(3)(i) Florida Status	as I further continues that the information	
	I on this report or supplemental report is trapporation or the receiver or trustee emporativity an address with all others.						

12/26/02 305-466-1802

Miami, December 26, 2002

## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS UNIFORM BUSINESS REPORT

Ref: CAYUS CORP REINSTATEMENT

Dear Sir/Madame:

Please find attached the UNIFORM BUSINESS REPORT FORM for CAYUS CORP. It was not filed in a timely manner because we never received any forms or communications on this regard. You will also find attached a check on the filling fee amount. Please waive any penalties since we were not aware of this requirement.

Please reinstate the active status for CAYUS CORP.

Best regards,

CAYUS CORP RICARDO BRAVO

President

or your