UNIFORM BUSINESS REPORT (UBR)

FILED Jun 03, 2002 8:00 am Secretary of State 06-03-2002 91201 004 ***150.00

DOCUMENT# 1. Entity Name INAGUA PROPERTIES, INC. POI 000044/16

maria de la composição	DE PROBLECIO DE LA COMPONICION DE LOS COMPONICIONS DE LA COMPONICION DELICON DE LA COMPONICION DE LA C		al Pauliniani				
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2. Principal Place	e of Business	3. Mailing Address	(1808) terbicipasis Parama	Do Was	80124247		
2. Principal Place of Business 49 57.		3. Mailing Address 301 SUNICISE DR 4BE			-		
Suite, Apt. #, e	etc.	Suite, Apt. #, etc.			DO NOT WI	RITE IN THIS SP.	ACE
City & State		City & State BISCH	YNR	FI.	4. FEI Number . 109 7	918	Applied For Not Applicable
33150	Country U.S.A.	^{Zip} B 3/49	Country	54	5. Certificate of Status Desired		8.75 Additional se Required
					7. Name and Address of Curre	nt Registered A	gent
Contraction (197				Name Cour	noes lonent	<u>10 – LUA</u>	ues -
energia de la composición. Politica de la composición de la compo		711/E		Street Address (F	O. Box Number is Not Acceptal	ole)	
Antonio de la composition della composition dell	IN:THIS SP	AGE		30150	innige Dr. I	IBE	
				City 6 = Y	BERDUNE	FL	Zip 146
A The above na	med entity submits this statement for	the purpose of changing its	registered	office or registers	ad agent, or both, in the State of		071.7.
o. The above hal	med entity sources this statement for	the pulpose of changing its	registered	onice or registere	so agent, or boat, in the state or		_
SIGNATURE	A					5.30	.02
Sign	nature, typed or printed hame of registered agent a	nd title if applicable. (NOT	E: Registered A	gent signature required	when reinstating)	DATE	
•	ion is eligible to satisfy its Intangible	January 1 -4	tay I Fee is		10. Election Campaign	Financino	\$5.00 May Be
Tax filing requ (See criteria d	uirement and elects to do so. On back)	Amende	d UBR is	\$61.25	್ಲೇಳ್ Trust Fund Contribut	~ —	Added to Fees
	<u>ຈ</u>	Make Check Paya	ble to Dep	artment of Stat	B 4.1		
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NAME	21/5/WINDE D	2 <i>48E</i>	NAME				
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CITY-ST-ZIP			City: \$	"ZIP III Z			
TITLE	VICE PREGIOEN	DE DE	me				
NAME STREET ADDRESS	JAVIER CABADA	2017 37	NAME	ADDRESS ***			
CITY-ST-ZIP	6290 SW. 499 MIAMI, FI. 33	155	CITY:SI				
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NAME	ا المستقدي المستقدية الدامية		NAME		uris britariuskyh 444,444 1404–150		
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CITY-ST-ZIP			CITY				
TITLE NAME			NAME		IN THIS	SPAC	
STREET ADDRESS			100	ADDRESS			
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CITY-ST-ZIP		 	ECITY S	augusti finkara	e interior de la company d La company de la company d	ien 'ne Pandi Benduk voor	si, ne o Pantinostratore Afri Alexandratores Sensos Patrico
TITLE NAME			TITLE	Primeri (Selection) Distriction (Selection)			
STREET ADDRESS				ADDRESS:			
CITY-ST-ZIP			CITY S	ZIP.			
				A CONTRACTOR OF THE CONTRACTOR			

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: