2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

P01000046853 DOCUMENT

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

1. Entity Name FLORIDA SUMMER, INC.

DE CIRIA, RAMON ROBERTO

the obligations of registered agent.

7320 OLD CUTLER RD. CORAL GABLES FL 33143



Country

City

Principal Place of Business 7320 OLD CUTLER RD.
CORAL GABLES FL 33143

Zip

SIGNATURE

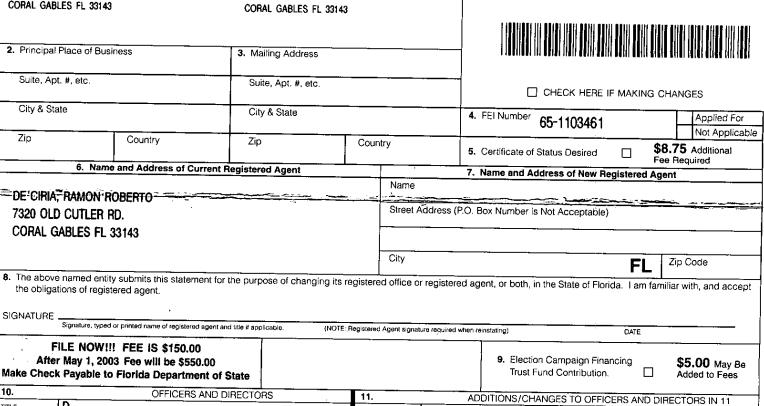
Mailing Address 7320 OLD CUTLER RD. CORAL GABLES FL 33143

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	

Zip



01-21-2003 90158 049 ***150.00



Afte Make Check	r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of State			9. Election Campaign Financing \$5. Trust Fund Contribution.	00 May Be ed to Fees
10. OFFICERS AND DIRECTORS		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
NAME STREET ADDRESS CITY-ST-ZIP	D DE CIRIA, RAMON ROBERTO 7320 OLD CUTLER RD. CORAL GABLES FL 33143	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
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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 tructee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: X