


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

DOCUMENT # P01000051466. 1. Entity Name LA Bone Adventure, Inc.	
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FILED
03 SEP 10 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5609 S. University Dr. Suite, Apt. #, etc.	3. Mailing Address 5609 S. University Dr. Suite, Apt. #, etc.
City & State DAVIE, FLA. Zip 33328	City & State DAVIE, FLA. Zip 33328
Country USA	Country USA

DO NOT WRITE IN THIS SPACE

DO NOT WRITE IN THIS SPACE	4. FEI Number GS-1107572 Applied For <input type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 7. Name and Address of Current Registered Agent Name: Jennifer Uzategui Street Address (P.O. Box Number is Not Acceptable): 1628 NW 208th way. City: Pembroke Pines FL Zip Code: 33029
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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 Jennifer Uzategui 9/4/2003
Signature, typed or printed name of registered agent and title if applicable. (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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE	PRESIDENT	TITLE	
NAME	Jennifer Uzategui PwL.	NAME	
STREET ADDRESS	5609 S University Dr.	STREET ADDRESS	
CITY-ST-ZIP	DAVIE, FL 33328	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
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CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	
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CITY-ST-ZIP		CITY-ST-ZIP	

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IN THIS SPACE**

T. Lewis 9/10/03

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: Jennifer Uzategui 9/4/2003 (954) 680-0668
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E0348 (12/02)

Friday, August 08, 2003

Attn: Thelma
Department of State
Division of Corporations
Amendment Section
Tallahassee, Florida

As per our phone conversation today, I am enclosing a check in the amount of \$150.00 for the filing of our May, 2003 UBR. Please waive the late fee as we did not receive any notification by regular mail nor email as to the filing.

Thank you for your help and consideration in this matter. We have always appreciated the info and assistance we have received from your office.

Regards,

A handwritten signature in black ink, appearing to read "Peter Parkman", written over the word "Regards,".

Peter Parkman
La Bone Adventure, Inc.
Doc#P01000051466