

FROM : GONZALEZ GUERNICA + MONTEAGUDO FAX NO. : 305 477-2115

FROM : 0

PHONE NO. : 0000000000

FILED

May 09, 2002 8:00 am
Secretary of State

05-09-2002 90081 015 ***150.00

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

DOCUMENT # P01000051666

1. Entity Name

XTRA DISPLAYS & EXHIBITS INC.

DO NOT WRITE IN THIS SPACE

B0093286

2. Principal Place of Business

919 W. 39 ST.

Suite, Apt. #, etc.

3. Mailing Address

8180 N.W. 36 ST.

Suite, Apt. #, etc.

STE. 230

City & State

MIAMI BEACH, FL

City & State

MIAMI FL

No.

33140

Country

USA

Zip

33166

Country

USA

DO NOT WRITE IN THIS SPACE

4. FEI Number

✓ Applicable For

Not Applicable

5. Certificate of Status Desired ☐

\$9.75 Additional
Fees Required

7. Name and Address of Current Registered Agent

Name

EDUARDO GONZALEZ

Street Address (P.O. Box Number is Not Acceptable)

8180 N.W. 36 ST.

SUITE 230

City

MIAMI

FL

Zip Code

33166

8. The agent named only submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

[Signature]

4-29-02

DATE

9. This corporation is eligible to qualify as Improbable
For filing requirements and please to do so.
(See criteria on back)

10. Election Campaign Financing
Term Fund Contribution. ☐

\$5.00 May Be
Added to Fees

OFFICERS AND DIRECTORS

NAME	STREET ADDRESS	CITY, ST. ZIP
D. P. A. ERNISO, RODOLFO	919 W. 39 ST.	MIAMI BEACH, FL 33140
NAME	STREET ADDRESS	CITY, ST. ZIP
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DO NOT WRITE
IN THIS SPACE

11. I hereby certify that the information furnished in this filing does not comply for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information furnished in this report is supplemental reports 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 proprietor or partner employed in the business of the corporation or the proprietor or partner employed in the business of the corporation.

12. I hereby certify that the information furnished in this filing does not comply for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information furnished in this report is supplemental reports 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 proprietor or partner employed in the business of the corporation or the proprietor or partner employed in the business of the corporation.

04/20/02

305 641 1909
754 398 2710