

FILED
Aug 05, 2003 8:00 am
Secretary of State

08-05-2003 90072 020 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000056788 1. Entity Name LAND OF PROMISES CORP.			
Principal Place of Business 564 NORTHWEST 1ST STREET FLORIDA CITY, FL 33034		Mailing Address 564 NORTHWEST 1ST STREET FLORIDA CITY, FL 33034	
2. Principal Place of Business 26768 SW 128 AVE. <small>Suite, Apt. #, etc.</small>		3. Mailing Address 26768 SW 128 AVE <small>Suite, Apt. #, etc.</small>	
City & State Homestead FL <small>Zip</small> 33032 <small>Country</small>		City & State Homestead, FL <small>Zip</small> 33032 <small>Country</small>	
4. FEI Number 65-1111274		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 343 ALMERIA AVENUE CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
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 _____ <small>Signature, typed or printed name of registered agent, and date if applicable. (NOTE: Registered Agents Signature required when necessary)</small>			
FILER NOW MUST PAY \$150.00 Annual May 15, 2005 Fee will be \$500.00 Annual \$250.00 to \$500.00 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		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IGLESIAS, CARLOS M 564 NORTHWEST 1ST STREET FLORIDA CITY, FL 33034	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IGLESIAS CARLOS M 26768 SW 128 AVE HOMESTEAD FL 33032	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD URREA JOSE 26768 SW 128 AVE HOMESTEAD FL 33032	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD LILLIAN JESENIA, CLAUDIO 664 NORTHWEST 1ST STREET FLORIDA CITY, FL 33034	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CLAUDIO Lillian Jesenia 26768 SW 128 AVE HOMESTEAD FL 33032	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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 Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u>Lillian Claudio Lillian Claudio 7/26/03 (305) 258-8776</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			

CP2E034 (10/02)

Attachment 80136131
#P01000056788

Land Of Promises Corp
26768 SW 128th Ave Homestead, FL 33032
(305) 258-8776

July 26, 2003

Reference: Land Of Promises Corp – Uniform Business Report

Attention: Division of Corporations

To Whom It May Concern:

Unfortunately we did not receive a Uniform Business Report for 2003. I tried contacting your offices to speak to someone in reference to why we did not get a form in the mail but kept getting a recording. According to the recording we are eligible to have the \$400 late fee waived due to non-receipt. Even though the corporation address has changed, we completed a change of address form at the Post Office but were unaware that we needed to contact you. Since we are a new corporation we did not know that we needed to file this report annually. If not for a friend, we would have not known to file. Please accept the attached Uniform Business Report and check for \$150 to keep our corporation active.

I apologize for any inconvenience this may have caused. Please feel free to contact me at (305) 258-8776 if you need any further information or documentation.

Thank You



Lillian Claudio
Secretary
Land Of Promises Corp