


**2005 FOR PROFIT CORPORATION 2005
UNIFORM BUSINESS REPORT (UBR)**

**FILED
May 03, 2005 8:00 am
Secretary of State**

05-03-2005 90155 024 ***150.00

DOCUMENT # 1. Entity Name	P 01000059409	
COPTER CORNER, INC.		

DO NOT WRITE IN THIS SPACE

60003011

2. Principal Place of Business 73 N.W. 167 Street Suite, Apt. #, etc.	3. Mailing Address 73 N.W. 167 Street Suite, Apt. #, etc.
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DO NOT WRITE IN THIS SPACE

City & State N. MIAMI BEACH, FLORIDA	City & State N. MIAMI BEACH, FLORIDA	4. FEI Number 65-1118051	Applied For <input type="checkbox"/> Not Applicable
Zip 33169	Country Miami-Dade	Zip 33169	Country MiamiDade
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name	HUGO D. CADELLI
Street Address (P.O. Box Number is Not Acceptable)	1985 S. Ocean Drive, 2-G
City	Hallandale FL 33009

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 _____ (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. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Cadelli, Hugo Daniel 1985 S. Ocean Drive, 2-G Hallandale, Florida 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD Marian, Olga Yolanda 1985 S.Ocean Drive , 2-G Hallandale, Florida 33009	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/02)

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 fee empowered.

SIGNATURE:  HUGO D. CADELLI PRESIDENT 4/21/05 305 651 1362