

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

05-05-2003 91760 027 ***150.00

DOCUMENT # P01000066327

1. Entity Name
PILLY'S INTERNATIONAL ENTERPRISE, INC.



Principal Place of Business
**1530 NORTH EAST 191 STREET SUITE 108
MIAMI FL 33179**

Mailing Address
**1530 NORTH EAST 191 STREET SUITE 108
MIAMI FL 33179**

2. Principal Place of Business
**275 GATE ROAD
Suite, Apt. #, etc. 211**

3. Mailing Address
**275 GATE ROAD
Suite, Apt. #, etc. 211**

City & State
HOLLYWOOD, FL
Zip
33024 Country
USA

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HOLLYWOOD, FL
Zip
33024 Country
USA

4. FEI Number **65-1119960**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MARANON, ONOFRE JOSE
1530 NORTH EAST 191 STREET SUITE 108
MIAMI FL 33179**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
**275 GATE ROAD
#211**
City **HOLLYWOOD** FL Zip Code **33024**

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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 ☐ Delete
NAME **D MARANON, ONOFRE JOSE**
STREET ADDRESS **1530 NORTH EAST 191 STREET SUITE 108**
CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
NAME **D MARANON, PILAR AMERICA**
STREET ADDRESS **1530 NORTH EAST 191 STREET SUITE 108**
CITY-ST-ZIP **MIAMI FL 33179**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **275 GATE ROAD #211**
CITY-ST-ZIP **HOLLYWOOD, FL 33024**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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: **SIGNATURE MOUNTED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-15-03

Date Daytime Phone #

CR2E034 (10/02)