

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90111 031 ***150.00

02/7/2004 AV

DOCUMENT # P01000076756

1. Entity Name
OCEAN 203, INC.

Principal Place of Business
2450 SW 137 AVE STE 221
MIAMI FL 33175

Mailing Address
2450 SW 137 AVE STE 221
MIAMI FL 33175



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2450 SW 137 AVE
 Suite, Apt. #, etc. **#234**

3. Mailing Address
2450 SW 137 AVE
 Suite, Apt. #, etc. **#234**

City & State
Miami FL
 Zip **33175** Country **USA**

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Miami, FL
 Zip **33175** Country **USA**

4. FEI Number **65-1127957**
 Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BURKLE, GUSTAVO
2450 SW 137 AVE STE 221
MIAMI FL 33175

7. Name and Address of New Registered Agent

Name **PETER M. LOPEZ, ESQ**
 Street Address (P.O. Box Number is Not Acceptable)
2450 SW 137th AVE
#234
 City **miami** FL Zip Code **33175**

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.

SIGNATURE **Peter M. Lopez** **4/22/02**
Signature type and print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **BURKLE, GUSTAVO**
 STREET ADDRESS **2450 SW 137 AVE STE 221**
 CITY-ST-ZIP **MIAMI FL 33175**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
 NAME **Burkle, Gustavo**
 STREET ADDRESS **c/o 2450 SW 137th Ave #234**
 CITY-ST-ZIP **miami, FL 33175**

TITLE ☐ Change ☒ Addition
 NAME **Asst. Sec. Peter m. Lopez**
 STREET ADDRESS **2450 SW 137 Ave #234**
 CITY-ST-ZIP **miami, FL 33175**

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

13. I hereby certify that the information submitted 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

PETER M. LOPEZ, ESQ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/02 **(305) 444-5538020**
Date Daytime Phone #

CR2E034 (9/01)