

ps 1072

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)


FILED

04 JUL 26 AM 11:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000077334

1. Entity Name
Keper Import + Export, Inc.



DO NOT WRITE IN THIS SPACE

600039576306
07/27/04--01081--006 **300.00

2. Principal Place of Business
207B Washington Ave
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Homestead, FL

City & State

Zip
33030 Country

4. FEI Number
20-1398950

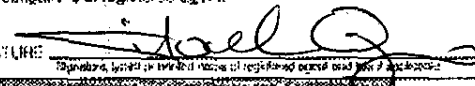
Applied For
 Not Applicable

DO NOT WRITE IN THIS SPACE

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

7. Name and Address of Current Registered Agent
Name: **MICHAEL OROSCO**
Street Address (P.O. Box Number is Not Accepted):
207B Washington Ave
City: **Homestead** State: **FL** Zip Code: **33030**

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: 

(Signature, typed or printed name of registered agent and title / Registered Agent signature required when registering) DATE

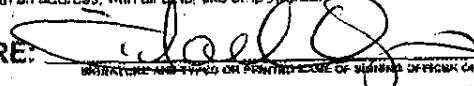
9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
P	OROSCO, MICHAEL	207B Washington Ave	Homestead, FL 33030
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 like empowered.

SIGNATURE: 

DATE: _____

CR200348 (12/02)

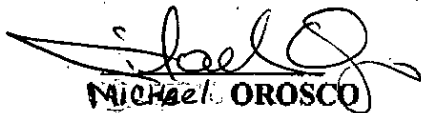
PS 272

Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from the Division of Corporations, I am attaching a check, in the amount of \$300.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2003, & 2004 or any other notice from the Division of Corporations in respect with the Corporation **KEPAR IMPORT & EXPORT, INC.**

Thank you for your courtesy in this matter.


Michael OROSCO
PRESIDENT