2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

20 UN	003 F	OR PROFI	T CORPO	RATI RT (J	ION UBR)	FILED Aug 04, 2003 8:00 am Secretary of State
DOCUMENT # P01000077518 1. Entity Name JOHANNA S. ARAUJO, P.A.						Secretary of State 08-04-2003 90156 049 ***150.00
Principal Place of Business 150 S.E. 25TH ROAD #3A MIAMI FL 33129			Mailing Address 150 S.E. 25TH ROAD #3A MIAMI FL 33129			
Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.			
City & State			City & State			4. FEI Number 65-1128442 Applied For Not Applied by
Zip			Zip	Coun	try	5. Certificate of Status Desired \$8.75 Additional Fee Required
ARALLIO JOHANNA S					7. Name and Address of New Registered Agent dress (P.O. Box Number is Not Acceptable)	
Suite 3A Miami Fl				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 Signature, typed or printed name of registered agent and title if applicable. (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 \$5.00 May Be Trust Fund Contribution.	
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD ARAUJO, 150 S.E. MIAMI FL	JOHANNA S 25TH ROAD SUITE 3A 33129	☐ Delete			☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete			l l	☐ Change ☐ Addition	
NAME TO THE STREET ADDRESS CITY-ST-ZIP			☐ Delete			Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		ſ	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		1	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		□ Delete	CITY-	E Et address - St- Zip	☐ Change ☐ Addition
 I hereby of indicated of the corporated, changed, 	certify that the on this repor poration or th or on an atta	e information supplied with t or supplemental teport is ne receiver or trustee ompo achment with art address, w	1//	for the exer of the signat of as required.	mption stated in ure shall have the ed by Chapter f	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information the the same legal effect as if made under oath; that I am an officer or director er 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if
SIGNATURE: SIGNATURE REQUIRED 1/31/03 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #						

Attachment

JOHANNA S. ARAUJO, P. A. 150 S.E. 25TH ROAD – SUITE 3-A MIAMI, FLORIDA 33129

July 31, 2003

Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314

Dear Sir or Madam:

One of my neighbors just gave me this form that he had kept in his home while I was out of the country. He apologized for the delay in handing me this form. My corporation is related to the real estate business and I work out of my apartment here in Miami.

I would like to apologize myself for the delay in sending you this form, but as I explained, I did not get the form on time for filing.

Please waive the penalties involved in the filing. In the future, I will make sure that this form is mailed in time before the due date. I am enclosing a check in the amount of \$150.00 hoping that the waiving of the penalties is done, for which I will be very grateful.

Please accept my thanks

Sincerel

Johanna S. Araujo

President