FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
03 FEB -3 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000084478

1. Entity Name
El Conquistador, Inc.

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2. Principal Place of Business	3. Mailing Address
105 Martin Luther King Blvd.	4024 Bay to Bay Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa, FL	City & State: Tampa, FL
Zip: 33603 Country: USA	Zip: 33629 Country: USA

4. FEI Number: 59-3741657 ☐ Applied For ☐ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Laura A. Olson
Street Address (P.O. Box Number is Not Acceptable): 200 N. Pierce St. 4th Floor
City: Tampa FL Zip Code: 33602

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] DATE: 1/30/03
(Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when reinstating)

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	President Kurt King 4024 Bay to Bay Blvd. Tampa, FL 33629
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President Kurt King 4024 Bay to Bay Blvd. Tampa, FL 33629
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Kurt King 4024 Bay to Bay Blvd. Tampa, FL 33629
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Kurt King 4024 Bay to Bay Blvd. Tampa, FL 33629
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Chairman Kurt King 4024 Bay to Bay Blvd. Tampa FL 33629
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	300011624673 02/03/03--01097--005 **150.00
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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 like empowered.

SIGNATURE: Kurt King 1/30/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #