FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

P9C/w2

DOCUMENT # P01000089625

1. Entity Name
La Perla Del Sur Meat + Seafood Distributors Corp

FILED
03 MAR 24 AM 11: 02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business
1221 Quail Ave

Suite, Apt. #. etc.

City & State
Miami Springs FL

Zip 33166   **County** USA

3. Mailing Address

Suite, Apt. #. etc.

City & State

Zip   Country

05/09/02 90031 005 180.00

4. FEI Number □ Applied For □ Not Applicable

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

7. Name and Address of Current Registered Agent

Name Daniel M Keil

Street Address (P.O. Box Number is Not Acceptable)
365 W 4 Ave

City Hialeah Florida   **FL**   Zip Code 33012

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

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. President   OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Rodrigo Zuniga 1221 Quail Ave Miami Springs FL 33166	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP
		800015848898 04/14/03--01012--004 **158.75
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		**DO NOT WRITE IN THIS SPACE**
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	02-03 UBR	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		

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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #

LA PERLA DEL SUR MEAT & SEAFOOD DISTRIBUTORS CORP.
1221 QUAIL AVE.
MIAMI SPRINGS, FLORIDA 33166

March 6, 2003

RE: DOCUMENT # P0100089625

Dear Sir:

I am writing with regards to my corporation LA PERLA DEL SUR MEAT & SEAFOOD DISTRIBUTORS CORP. Last year I filed my report on time and was never informed that additional information was needed. I never received any notice in the mail other than the one that said that it was already dissolved.

Enclosed please find my UBR BUSINESS REPORT for 2003. I truly hope that you take into consideration the fact that I did not receive any previous notice, I would have taken the proper steps to insure that it was not dissolved.

Thanking you in advance for your sincere attention to this matter.

Very truly yours,

RODRIGO ZUNIGA