FILED
Jul 02, 2002 8:00 am
Secretary of State
05-21-2002 90889 042 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000091787

1. Entity Name
E. E. STEPHANY, CORP.

DO NOT WRITE IN THIS SPACE

96256

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
4474 WESTON ROAD	4474 WESTON ROAD
Suite, Apt. #, etc. SUITE 131	Suite, Apt. #, etc. SUITE 131
City & State DAVIE FL	City & State DAVIE FL
Zip 33331 Country USA	Zip 33331 Country USA

4. FEI Number 65-1139131 ☐ Applied For ☐ Not Applicable

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

7. Name and Address of Current Registered Agent

Name GBS Consultants
Street Address (P.O. Box Number is Not Acceptable) 1290 Weston Rd. Suite 210
City Weston FL Zip Code 33326

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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 X
Signature, typed or printed 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) ☐

January 1 - May 1: Fee is $150.00
After May 1: Fee is $550.00
Amended UBR is $61.25
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	TITLE	
NAME	MENA, PEDRO	NAME	
STREET ADDRESS	4474 WESTON ROAD SUITE 131	STREET ADDRESS	
CITY-ST-ZIP	DAVIE FL 33331	CITY-ST-ZIP	
TITLE	D	TITLE	
NAME	DE MENA, ROSA D	NAME	
STREET ADDRESS	4474 WESTON ROAD Suite 131	STREET ADDRESS	
CITY-ST-ZIP	DAVIE FL 33331	CITY-ST-ZIP	
TITLE		TITLE	
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Pedro Mena 4/29/02 954-6598835
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment
96354

Jun 26, 2002

Florida Department Of State
Division Of Corporations
P.O. Box 1500
Tallahassee, FL 32302

REF.: E.E Stephany, Corp
Reference # P01000091787

Dear Sir or Madam:

The letter is to inform to you that we recived a letter from Florida Department of State saying that you recived our annual report/Uniform Business Report and our check totaling $ 150.00, but we have not filed the current register agent's name and address. We are sending the corrected report whit this letter.

Thank your cooperation to solvent this mistake.

Thank you in advance,

Pedro Mena
Pedro Mena