FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)			FIĽĒD	
DOCUMENT # P0100092568			03 OCT 21 AM 10: 16	
1. Entity Name Morales Financial, Inc.			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DO NOT WRITE	IN THIS S	PACE		
Principal Place of Business 3. Mailing Address 9/1 Corsica Drive 19/1 Corsica Drive		RENOTATINE	11 07 11	
Suite, Apt. #, etc.	Suite. Apt. #. etc.		DO NOT WRITE IN THIS SF	ACE
City & State Wellington, FL			4. FEI Number 65-1140292 Applied For Not Applicable	
Zio 33414 (JSA	Zip 33414	Country		8.75 Additional ee Required
		Name O	7. Name and Address of Current Registered	Agent
DO NOT WRITE IN THIS SPACE		Da	Street Address (P.O. Box Number is Not Acceptable)	
		1911		
		City /////		
8. The above named entity submits the statement for the obligations of registered agers.	the purpose of changing its	s registered office or registe	erechagent, or both, in the State of Florida. I am far	miliar with, and accept
SIGNATURE X Dam Mara	2 Daniel	Moryle	10/14/200	03
January 1 - May 1 Fee Is \$150.00 After May 1, Fee is \$550.00	nd title it applicable. (NO	TE: Registered Agent signature require		\$5.00 May Be
Amended UBR is \$61.25 Make Check Payable to Florida Department of			Trust Fund Contribution.	Added to Fees
10. OFFICERS AND D	DIRECTORS	TITLE		
NAME Daniel Morales STREET ADDRESS 1911 Corsica Drive		NAME STREET ADDRESS		48 (12/02)
CITY-ST-ZIP Wellington, FC 33414.		CITY-ST-ZIP	3000239701	
TITLE NAME		TITLE NAME		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS		
TITLE NAME		TITLE NAME	6	
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
TITLE		TITLE NAME		
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CITY-ST-ZIP TITLE		CITY-ST-ZIP TITLE		
NAME STREET ADDRESS		NAME STREET ADDRESS		-
CITY-ST-ZIP TITLE		CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	
NAME STREET ADDRESS		NAME STREET ADDRESS		•
CITY-ST-ZIP 12. I hereby certify that the information supplied with I	this filing does not qualify fo	CITY-ST-ZIP or the exemption stated in S	ection 119.07(3)(i), Florida Statutes. I further certif	y that the information
12. I hereby certify that the information supplied with I indicated on this report or supplemental report is of the corporation or the receiver or trustee emp attachment with anaddgesy, with all other like end	true and accurate and that wered to execute this repo	my signature shall have the ort as required by Chapter (	same legal effect as if made under oath; that I arr 507, Florida Statutes; and that my name appears i	i an officer or director in Block 10 or on an
SIGNATURE: Dank	pule	Daniel Mora		58-1114
SIGNATURE. SIGNATURE AND TYPED OR AR	NINTED NAME OF SIGNING OFFICER		Date Day	lime Phone #

## MORALES FINANCIAL INC. 1911 Corsica Drive Wellington, FL 33414

October 14, 2003

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Department of State Division of Corporations Corporate Filings PO BOX 6327 Tallahassee, FL 32314

## RE: 2003 UBR for "MORALES FINANCIAL, Inc."

Dear Department of State:

My name is Daniel Morales and I am one of the principals of Morales Financial Inc. We never received our original UBR form, because our business had moved and the post office did not forward this important form. It was not until we received the enclosed notice that we realized our UBR was late. We have always filed on time and would never want to be late in filing the State required form. We are respectfully requesting that you accept our \$150.00 plus our signed UBR for tax year 2003. Again, please understand that we would have paid the \$150.00 prior to May 1, 2003 if we had received our form in the mail. Thank you for your time and consideration.

Sincerely,

Daniel Morales, President

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