FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 91367 031 ***150.00

2003 FO	R PROFIT C	ORPORAT	ION
UNIFORM	BUSINESS	REPORT (UBR)

Principal Pince of Dusiness 2002 NR 7200 AVENUE 2004 April #, etc. Suite April #, etc. Suite April #, etc. Suite April #, etc. Country	1. Entity Nam	MENT # P010000952 IN EXCELLENCE, INC.	222 ✓				04-28-2003	<i>71307</i> 0.	<i>j</i> 1 1	30.00	
Sulfe, Apt. F, etc. CHCK HERE IF MAKING CHANGES	2802 N.W. 7	2ND AVENUE	2802 N.W. 72ND AVENUE								
City & State City & State City	2. Principal P	Place of Business	3. Mailing Address]					
Secondary Seco	Suite, Apt.	#, etc.	Suite, Apt. #, etc.				CHECK HERE IF	MAKING CI	ANGES		_
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BUSTOS, HORACIO M 2807 N.W. 72ND AVENUE MAMM, FL 33122 THE above names entity abmits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligations of registered agent, or both, in the State of Florida. I am harmar arwith, and socient the obligation of the obligation	Z ip	::- Country ::-	Zip~ - <u></u>	_ Coun	try -	5. (Certificate of Status Desired	\$8	3.75 Add	litional '	
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FILE NOWIT: FEE IS \$150.00 Any Board Author of Appeared Agent In author and the in Appeared Agent			r the purpose of changing its i	register	ed office or register	red age	ent, or both, in the State of Flori	da. I am fan	illar with,	and accept	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3X), 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.	, i		☐ Delete		,] Change	Addition	
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	SIGNATURE: N. PALOMBO PD 04/21/03										