

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 09, 2002 8:00 am**  
**Secretary of State**

02-10-2002 90042 049 \*\*\*150.00

**DOCUMENT # P01000107799**  
 1. Entity Name  
**SHELLTECK HOMES INC.**

Principal Place of Business <del>250 CATALONIA AVENUE</del> <del>PH 001</del> <del>CORAL GABLES FL 33134</del>	Mailing Address <del>250 CATALONIA AVENUE</del> <del>PH 001</del> <del>CORAL GABLES FL 33134</del>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>6930 SW 159 PL</b> Suite, Apt. #, etc.	3. Mailing Address <b>6930 SW 159 PL</b> Suite, Apt. #, etc.
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City & State <b>MIAMI FLA</b>	City & State <b>MIAMI FLA</b>
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4. FEI Number <b>65-1155389</b>	Applied For <input type="checkbox"/> Not Applicable
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Zip <b>33193</b>	Country <b>DADE</b>	Zip <b>33193</b>	Country <b>DADE</b>
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  
**SCULL, IGNACIO**  
~~250 CATALONIA AVENUE~~  
~~PH 001~~  
~~CORAL GABLES FL 33134~~  
**6930 SW 159 PL**  
**MIAMI FL 33193**

7. Name and Address of New Registered Agent  
 Name \_\_\_\_\_  
 Street Address (P.O. Box Number is Not Acceptable) \_\_\_\_\_  
 City \_\_\_\_\_ **FL** Zip Code \_\_\_\_\_

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>SCULL, IGNACIO</b> <b>6930 SW 19TH PLACE</b> <b>MIAMI FL 33193</b> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <del>ALVAREZ MIRANDA, JUAN C</del> <del>7200 SW 84 STREET</del> <del>MIAMI FL 33143</del> <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED** *Ignacio Scull* **3/29/2002 (305) 3877903**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment  
Dir. # 01000107799

SHELLTECK HOMES

6930 SW 159 Place  
MIAMI FLA 33193

22005

To Whom May Concern:

As per your request I'm sending back to you  
my annual report with the following corrections:

- New Address

- FEI Number

- Signed by the President



IGNACIO G. BULL