

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 23, 2003 8:00 am
Secretary of State

06-23-2003 90513 001 ***250.00
06-23-2003 90513 002 ***300.00

DOCUMENT # P01000108434

1. Entity Name
ESPERANZA INVESTMENT COMPANY

DO NOT WRITE IN THIS SPACE

55049723

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5757 Collins Avenue Suite, Apt. #, etc. #1904 City & State Miami Beach, FL Zip 33140 Country USA		3. Mailing Address 7098 Bonita Drive Suite, Apt. #, etc. City & State Miami Beach, FL Zip 33141 Country USA		4. FEI Number 65-1153620 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Esperanza Perez**
Street Address (P.O. Box Number is Not Acceptable)
5757 Collins Ave, #1904
City **Miami Beach** **FL** Zip Code **33140**

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 *Esperanza Perez* **06/16/03**
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 NAME STREET ADDRESS CITY-ST-ZIP	P, S, D Perez, Esperanza 5757 Collins Avenue, #1904 Miami Beach, FL 33140	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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: *Esperanza Perez* **Esperanza Perez President** **06/16/03**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034B (12/01)