2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) **DOCUMENT #** P02000004289



FILED Feb 28, 2003 8:00 am Secretary of State

JOSE ENRIQUE DATENA, INC.					02-28-2003 90117 019 ***150.00		
Principal Place of Business 1243 READING TERR. WELLINGTON FL 33414		Mailing Address 1243 READING TERR. WELLINGTON FL 33414					
2. Principal	Place of Business	3. Mailing Address					
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			-		
City & Sta	nte .	Chi Chi		☐ CHECK HERE IF MAKING CHANGES			
		City & State			4. FEI Number 42 88 70 Applied Fo		
Zip Country		Zip Country		try	5. Certificate of Status Desired	\$8.75 A	dditional
	6: Name and Address of Curren	t Registered Agent		+		Fee Required Agent	rea
DATENA,	JOSE E	, ·	Name				
1243 RE/	ADING TERR.	the second second	Siegi,	Street Address (P.O. Box Number is Not Acceptable)		
WELLING	TON FL 33414		Ī		·		
			ļ	City		Zip Cod	de
8. The above	e named entity submits this statement t tions of registered agent.	or the purpose of changing its	registere	d office or register	ed agent, or both, in the State of Florida. I	am familiar with	, and accept
SIGNATURE	_	•					
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOT	E: Registered	Agent signature required	when reinstating) DA	TE	
Afte	TLE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00				Election Campaign Financing Trust Fund Contribution.		00 мау Ве
10.	k Payable to Florida Department of OFFICERS AND						ed to Fees
TITLE	PVST	DIRECTORS Delete	11.		ADDITIONS/CHANGES TO OFFICERS		
NAME STREET ADDRESS CITY-ST-ZIP	DATENA, JOSE E 1243 READING TERR. WELLINGTON FL 33414		NAME	r address St-zip		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Datena, Jose E 1243 Reading Terr. Wellington FL 33414	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS IT-ZIP		☐ Change	Addition
TITLE NAME Street address City-St-Zip	en e	☐ Delete	TITLE NAME STREET CITY-S	ADDRESS T-ZIP	and the second of the second o	☐ Change	[] Addition
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		□ Delete .	TITLE NAME STREET CITY-ST	ADDRESS 1-zip		☐ Change	☐ Addition
ITLE IAME ITREET ADDRESS IJTY-ST-ZIP		☐ Delete	TITLE NAME STREET, CITY-ST	ADDRESS 1- ZIP		☐ Change	Addition
ITLE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete	CITY-ST			☐ Change	☐ Addition
I hereby conditions indicated of the corporation changed.	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with a padress	this filing does not qualify for t true and accurate and that my wered to execute this report a with all other like empowered.	the exemp y signature is required	otion stated in Sect e shall have the sa I by Chapter 607	tion 119.07(3)(i), Florida Statutes. I further of time legal effect as if made under oath; that Florida Statutes; and that my name appears	ertify that the in I am an officer is s in Block 10 or	nformation or director Block 11 if

SIGNATURE: