

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000005926

FILED
Apr 29, 2003
Secretary of State

Entity Name: YUCA PROPERTIES, INC.

Current Principal Place of Business:

7231 SW 63RD AVENUE
SUITE 200
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7231 SW 63RD AVENUE
SUITE 200
MIAMI, FL 33143

New Mailing Address:

FEI Number: 90-0003075

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRU, RAFAEL I
7231 SW 63RD AVENUE
SUITE 200
MIAMI, FL 33143

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MOREIRA, DOMINGO A
Address: 526 DAROCO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: VD () Delete
Name: MOREIRA BRU, ANA MARIA
Address: 11080 PARADELA STREET
City-St-Zip: MIAMI, FL 33156

Title: STD () Delete
Name: MOREIRA, MARGARET G
Address: 526 DAROCO AVENUE
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MOREIRA, DOMINGO A
Address: 5845 SW 100 STREET
City-St-Zip: MIAMI, FL 33156

Title: VD (X) Change () Addition
Name: MOREIRA BRU, ANA MARIA
Address: 4680 SW 74 STREET
City-St-Zip: MIAMI, FL 33143

Title: STD (X) Change () Addition
Name: MOREIRA, MARGARET G
Address: 5845 SW 100 STREET
City-St-Zip: CORAL GABLES, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOMINGO A. MOREIRA

PD

04/29/2003

Electronic Signature of Signing Officer or Director

Date