

FILED
Jun 18, 2004 8:00 am
Secretary of State

4/3

04-30-2004 90292 015 ***158.75

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

DOCUMENT # <u>P02000020592</u>	
1. Entity Name <u>Burbya Corporation</u>	

DO NOT WRITE IN THIS SPACE

66428601

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>901 Concedeleon Blvd</u> Suite, Apt. #, etc. <u>Suite 603</u>		3. Mailing Address <u>10 Venetian Way</u> Suite, Apt. #, etc. <u>1805</u>	
City & State <u>Coral Gables</u>		City & State <u>Miami Beach</u>	
Zip <u>33134</u>	Country <u>USA</u>	Zip <u>33131</u>	Country <u>USA</u>
4. FEI Number <u>45-0467587</u>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired		☒ \$8.75 Additional Fee Required	

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name <u>Juan Ramon Perez-Cirera</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>10 Venetian Way 1805</u>	
City <u>Miami Beach</u>	FL Zip Code <u>33139</u>

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE Juan Ramon Perez-Cirera [Signature] DATE 04/01/04

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$350.00
Amended UBR is \$81.25
Make Check Payable to Florida Department of State.

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Enrique Perez-Cirera</u> <u>10 Venetian Way 1805</u> <u>Miami Beach FL 33139</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Vice President</u> <u>Enrique Perez-Cirera</u> <u>10 Venetian Way 1805</u> <u>Miami FL 33139</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Secretary</u> <u>Enrique Perez-Cirera</u> <u>10 Venetian Way 1805</u> <u>Miami FL 33139</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>Treasurer</u> <u>Enrique Perez-Cirera</u> <u>10 Venetian Way 1805</u> <u>Miami FL 33139</u>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Enrique Perez-Cirera [Signature] DATE 04/01/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2034B (12/02)