2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000020605



FILED Mar 07, 2003 8:00 am Secretary of State

	ITS, INC.				03-07-2003 90101 01	0 ***150	7.00
Principal Place of Busin 7484 SW 93RD COURT MIAM! FL 33173	ess	Mailing Address 7484 SW 93RD COURT MIAMI FL 33173		(188)1881	CIL BEILE HEIL SEIN BEN BEN BEN BEN	 18 5 10 11 11 11 11 11 11	W 2412 , 244, 244
2. Principal Place of Bus	siness	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING	CHANGE	s
City & State		City & State				Applied For	
Zip	Country	Zip	Country		f Status Desired	\$8.75 A	Not Applicable dditional
6. Nan	ne and Address of Current R	egistered Agent		7. Name and A	ddress of New Registered A	Fee Requir	ed
MACHADO IOCE I	140 500		Name		J. C.	·gon.	
MACHADO, JOSE LUIS ESQ. 8500 SW 8TH STREET			Street Addre	ss (P.O. Box Number	P.O. Box Number is Not Acceptable)		
SUITE 238				<u> </u>			<u> </u>
MIAMI FL 33144			City		FL	Zip Cod	 de
 The above named ent the obligations of regis 	ity submits this statement for t stered agent.	the purpose of changing it	s registered office or regi	stered agent, or both,	in the State of Florida. I am fa	 amiliar with	, and accept
SIGNATURE	d or printed name of registered agent and	tille if applicable					
	a or branco riginio or registered agent and						
	III EEE IS \$150.00	The rapplicable. (NO	TE: Registered Agent signature requ	uired when reinstating)	DATE		
FILE NOW	III , FEE IS \$150.00 103 Fee will be \$550.00 to Florida Department of \$		TE. negistered Agent Signature requ	9. Elect	ion Campaign Financing Fund Contribution.		00 May Be
FILE NOW! After May 1, 20 Make Check Payable t 10.	03 Fee will be \$550.00	State	11.	9. Elect Trust	ion Campaign Financing	Adde	d to Fees
FILE NOW After May 1, 20 Make Check Payable to 10. TITLE D GONZALE	03 Fee will be \$550.00 to Florida Department of \$ OFFICERS AND DI EZ, JOAQUIN A 93RD COURT	State		9. Elect Trust	ion Campaign Financing Fund Contribution.	Adde	d to Fees
After May 1, 20 Make Check Payable to 10. TITLE D NAME GONZALE STREET ADDRESS 7484 SW	03 Fee will be \$550.00 to Florida Department of \$ OFFICERS AND DI EZ, JOAQUIN A 93RD COURT	State	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	9. Elect Trust	ion Campaign Financing Fund Contribution. HANGES TO OFFICERS AND	Adde DIRECTOR Change	d to Fees
FILE NOW After May 1, 20 Make Check Payable t 10. TITLE NAME STREET ADDRESS THE NAME STREET ADDRESS THE NAME STREET ADDRESS	03 Fee will be \$550.00 to Florida Department of \$ OFFICERS AND DI EZ, JOAQUIN A 93RD COURT	RECTORS Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	9. Elect Trust ADDITIONS/CI	ion Campaign Financing Fund Contribution. HANGES TO OFFICERS AND	Adde DIRECTOR Change	d to Fees IS IN 11 Addition
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FILE NOW After May 1, 20 Make Check Payable t 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	03 Fee will be \$550.00 to Florida Department of \$ OFFICERS AND DI EZ, JOAQUIN A 93RD COURT	RECTORS Delete Delete	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	9. Elect Trust ADDITIONS/CI	ion Campaign Financing Fund Contribution. HANGES TO OFFICERS AND	Adde DIRECTOR Change Change	d to Fees SIN 11 Addition Addition Addition

of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

Daytime Phone #