2003	UNIFORM BUSIN	NESS REPUR	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	JRK)													
DOCUMENT# P02000022631  1. Entity Name  MANANCIAL CORPORATION					FILED 03 AUG -5 PM 12: 58												
									Principal Place of Business Mailing Address					SECRETARY OF STATE			
									22989 SW 56TH AVE.		22989 SW 56TH AVE.		SECRETARY OF STATE TALLAHASSEE. FLORIDA				
BOCA R	BOCA RATON, FL	ATON, FL 33433				·											
2. Principal Place of Business		3. Mailing Address															
Suite Apt.#, etc,		Suite. Apt. #. etc.		DO NOT WRITE IN THIS SPACE													
City & Stale		City & Stale		4. FEI Number 01-0610217		<u> </u>	oplied For ot Applicable										
Zip	Country	Zip	Country		5. Certificate of Status Desired		8.75 Add	litional									
	6. Name and Address of Current R	egistered Agent			7. Name and Address of New Reg	istered A	gent										
TAX HOUSE CORPORATION					TAX HOUSE CORPORATION												
3929 N FEDERAL HWY				Street Address (P 0. Box Number is Not Acceptable)  1261 E SAMPLE ROAD													
POMPANO BEACH, FL 33064																	
· !	•		[ (	POME	PANO BEACH	FL	Zip Cod	e 33064									
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NO	TE:Registe	<del></del> ,	required when reinstating)	_	6/09/03 DATE	<u>-</u>									
Tax filing (See crite	After MAY 1, 2003 Make Check Payable	Fee wil	ll be \$550.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees													
11,	OFFICERS AND D		12.		ADDITIONS /CHANGES TO OFFIC												
TITLE NAME STREET ADORESS CITY-ST-ZIP	PD DE SOUZA, ELOAQUINO C. 22989 SW 56TH AVE. BOCA RATON, FL 33433	∟ Delete	NAME STREET A CITY- ST-	"	<b>5000225</b> 3 08/05/0301004		□ Change 5 <b>□</b> *150.0	Addition									
TITLE RAME STREET ADDRESS CITY-ST-ZIP	VD SOUZA, CRISTIANO A. 22989 SW 56TH AVE.	☐ Delete	TITLE NAME STREET A	1	,		Change	Addition									
TITLE	SD SD	<b>⊠</b> Delete	TITLE				Change	Addition									
NAME STREET ADDRESS CITY-ST-ZIP	SILVA, AILTON M. 22989 SW 56TH AVE. BOCA RATON, FL 33433		NAME STREET A CITY- ST-		·			,									
TITLE		. Delete	TITLE			-	Change	Addition									
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET A CITY-ST-														
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NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET A CITY-ST-	j.	•												
TITLE		☐ Delete	TITLE NAME STREET A			1	Change	Addition									
STREET ADDRESS CITY-SY-ZIP	artify that the information avantled with the	is filling door not qualify for the	CITY-ST-	ZiP	tion 1 10 07/3V41 Elevide Cabuser 1 5	ribos samis	u shoo shoo to	Mormatic -									
indicated of the cor	ertify that the information supplied with the don't his report or supplemental report is proration or the receiver or trustee empower on an attachment with an address, with all and the second of the	rue and accurate and that my sered to execute this report as a	signature	shall have the s	ame legal effect as if made under oat	h: that I am	an officer	or director									

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 06/09/03 Date Daytime Phone # FLORIDA DEPARTMENT OF STATE Division of Corporation 2002 Uniform Business Report (UBR) 409 East Gaines Street Tallahassee, FL 32399

Re: Filing of Uniform Business Report 2003 P02000022631 MANANCIAL CORPORATION, INC.

To Whom It May Concern:

This letter is to inform you that we have never received a Uniform Business Report form by the mail.

We would like to request you that you forgive all extra fees and penalties other than the primary of \$150.00 and accept the filling of our attached UBR, which has been prepared by our accountant.

Any questions or concern, feel free to contact our accountant at (954) 725-4600 and speak to Mr. Breno Gomes.

Sincerely,

DE SOUZA, ELOAQUINO C. - President

MANANCIAL CORPORATION

22989 SW 56<sup>TH</sup> AVENUE

**BOCA RATON FL 33433** 

PHONE (561) 218-0813