2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) DOCUMENT

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

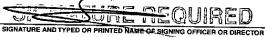
1. Entity Name AROCA ENTERPRISES CORP								02-28-2003 90120 041 ***150.00				
Principal Pla 45 SW 24 I MIAMI FL 3		ss	45	Mailing Address 45 SW 24 ROAD MIAMI FL 33129								
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City & State				4. FEIN	1-3626	023		Applied For Not Applicable	-
Zip Country				Zip Co		5. Certificate of Status D		icate of Status De	sired	\$8.75 Ac	ditional	-
	6. Name	and Address of Cur	rent Register	ed Agent			7. Name	and Address of	New Register	ed Agent		-
SAENZ, GEORGE 45 SW 24 ROAD MIAMI FL 33129					Nam Stree			umber is Not Acce			-	_
					City	-				Zip Cod	_	-
the obliga		y submits this stateme ered agent. or printed name of registered a			s registered office				of Florida. 1		and accept	
Afte	r May 1, 200	FEE IS \$150.00 Fee will be \$550. Florida Departmen	00 t of State				9.	Election Campai Trust Fund Contr		\$5.0 Adde	00 May Be d to Fees	i
10.		OFFICERS A	ND DIRECTO	RS	11,	-	ADDITIO	NS/CHANGES TO	OFFICERS /	ND DIRECTOR	0.151.44	ļ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PS AROCA, S 45 SW 24 MIAMI FL	EBASTIAN ROAD		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s	ABBITTO	ing/orizinges (C	OFFICERS	☐ Change	Addition ,	
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ITLE IAME TREET ADDRESS	<u>,</u> i.,			☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	

I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director changed, or on an attachment with an address, with all other like empowered.

GNATURE:

O2. 26.03

SIGNATURE:



Daytime Phone #