

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

FILED
Feb 11, 2003 8:00 am
Secretary of State

02-11-2003 90083 047 ***150.00

DOCUMENT # P02000031963

1. Entity Name

E & G GLOBAL CORP. ✓

DO NOT WRITE IN THIS SPACE

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2. Principal Place of Business

7845 CAMINO REAL #0-314

Suite, Apt. #, etc.
#0-314

City & State
MIAMI, FL

Zip
33143

3. Mailing Address

7845 CAMINO REAL

Suite, Apt. #, etc.
#0-314

City & State
MIAMI, FL

Zip
33143

Country
USA

4. FEI Number

02-0580352

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

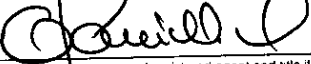
Name
GUSTAVO A JARAMILLO

Street Address (P.O. Box Number is Not Acceptable)
7845 CAMINO REAL #0-314

City
MIAMI, FL Zip Code
33143

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IN THIS SPACE**

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.

SIGNATURE:  GUSTAVO A JARAMILLO PRESIDENT 2-6-03

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT/TREASURER
GUSTAVO A JARAMILLO
7845 CAMINO REAL #0-314
MIAMI, FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE-PRESIDENT/SECRETARY
EUGENIA M JARAMILLO
7845 CAMINO REAL #0-314
MIAMI, FL 33143

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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13. 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 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:  GUSTAVO A JARAMILLO PRESIDENT 2-6-03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)