


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90387 050 ***150.00

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DOCUMENT # P02000035467	
1. Entity Name IGGYMAN, INC.	

Principal Place of Business 10501 SW 108 AVENUE APT A-115 MIAMI FL 33176	Mailing Address 10501 SW 108 AVENUE APT A-115 MIAMI FL 33176
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2. Principal Place of Business 10360 SW 150 Crt Suite, Apt. #, etc. 12208 City & State Miami, Fla Zip 33196 Country USA	3. Mailing Address 10360 SW 150 Crt Suite, Apt. #, etc. 12208 City & State Miami, Fla Zip 33196 Country USA
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☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 81-0545803	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GUZMAN, IGNACIO 10501 SW 108 AVENUE APT A-115 MIAMI FL 33176	
7. Name and Address of New Registered Agent Name: Ignacio Guzman Street Address (P.O. Box Number is Not Acceptable) 10360 SW 150 Crt Apt # 12208 City: Miami FL Zip Code: 33196	

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: Ignacio Guzman (NOTE: Registered Agent signature required when reinstating) DATE: 04/29/03

FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State	9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GUZMAN, IGNACIO 10501 SW 108 AVENUE APT A-115 MIAMI FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MENDOZA, FLORELIA 10501 SW 108 AVENUE APT A-115 MIAMI FL 33176 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ignacio Guzman **DATE:** 04/29/03 **PHONE:** (305) 380-1551

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)