FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91416 026 ***150.00

DOCUMENT # P02000037460 1. Entity Name DWEB SOLUTION ,INC. DO NOT WRITE IN THIS SPACE						003 91416 0	26 ****130.00	
					11040350			
2. Principal Place of Business 2625 N.W. 68 WAY 2625 N.W. 68 N.W. 68 WAY								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State			4. FEI Number 01-0658414 Applied For			
Zip Country .		Zip	Zip Country		5 Certificate of Status Desired		.75 Additional	
FL	33313 	FL	3331 	7. Name and Address of Current Registered Agent				
				Name JORG	GE LUIS LOPEZ			
DO NOT WRITE				Street Address (Street Address (P.O. Box Number is Not Acceptable)			
	IN THIS	SPACE		2625 N.W. 68 WAY				
				Cily SUNRIS		FL	Zip Code 33313	
8. The above the obligat	named entity submits this stateme tions of registered agent.	ent for the purpose of	changing its register	ed office or register	red agent, or both, in the State of	Florida. I am fam	liar with, and accept	
CICNIATURE				•				
SIGNATURE	Signature, typed or printed name of registered nuary 1 - May 1 Fee Is \$150.00		(NOTE: Registere	d Agent signalure required	t when reinstating)	DATE		
	After May 1, Fee is \$550.00 Amended UBR is \$61.25		-		Election Campaign Trust Fund Contribu		\$5.00 May Be Added to Fees	
Make Check	k Payable to Florida Departme	nt of State AND DIRECTORS			JANAS (, programa MS ASSOCIATE CONTRACTOR CONTRACTO	Egillarings, re C., ', Surgitor.	. Shingper with dept the colorest and	
TITLE	PRESIDENT, JORGE L		2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	TERETOR E SANT			8	
NAME STREET ADDRESS	ME 2625 N.W. 68 WAY		NAM SIRE	AME INCEPTACHES.		CRZE034B (12/02)		
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NAME			NAME	Construction of the state of th		ardigi i sistembli sida Percepatral perabah Salah sebagai salah		
STREET ADDRESS City-St-ZIP		•		ST-ZIP				
12. I hereby o	r certify that the information sumplied on this report or supplemental rep	I with this filling does not is take and accural	ot qualify for the exer	ention stated in Se	ction 119.07(3)(i), Florida Statute	s. I further certify	that the information	
of the cor attachme	poration or the receiver or trestee nt with an address, with all of particular	powered to execute empowered.	te this report as requ	ired by Chapter 60	07, Florida Statutes; and that my	name appears in	Block 10 or on an	
SIGNAT	TURE:				IMIGG 01:21	203 131	15)2449531	
SIGIAMI	GNATURE AND THE	O OR PRINTED NAME OF SIG	NING OFFICER OR DIRECT	OR	Dale Dale	Davin	e Phone #	