
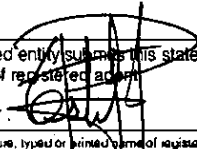
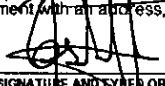


FILED
Sep 02, 2003 8:00 am
Secretary of State

09-02-2003 90183 001 ***150.00

**2003 FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000038326			
1. Entity Name MOR USA INC.			
Principal Place of Business 6075 W. 20 AVENUE #305 HIALEAH, FL 33012		Mailing Address 6075 W. 20 AVENUE #305 HIALEAH, FL 33012	
2. Principal Place of Business 2157 NW 79 th Avenue Suite, Apt. #, etc.		3. Mailing Address 2157 NW 79 th Avenue Suite, Apt. #, etc.	
City & State Miami, FL		City & State Miami, FL	
Zip 33122	Country U.S.A.	Zip 33122	Country U.S.A.
6. Name and Address of Current Registered Agent CASTRO, PABLO A 6075 W. 20 AVENUE #305 HIALEAH, FL 33012		4. FEI Number 02-0581221 Applied For <input type="checkbox"/> Not Applicable	
7. Name and Address of New Registered Agent Name Castro, Pablo A. Street Address (P.O. Box Number is Not Acceptable) 2157 NW 79 th Avenue City Miami FL Zip Code 33122		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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 		Pablo A. Castro - President 8-27-03 DATE	
SIGNATURE, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent's signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Amended UBR is \$61.26 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FIDALGO, JORGE M 6075 W. 20 AVENUE #305 HIALEAH, FL 33012 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD Pablo A. Castro 2157 NW 79 th Ave Miami, FL 33122 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD CASTRO, PABLO A 6075 W. 20 AVENUE #305 HIALEAH, FL 33012 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Jorge M. Fidalgo 2157 NW 79 th Ave Miami, FL 33122 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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	<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	<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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 reports 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: 		Pablo A. Castro 8-27-03 3055026693 Daytime Phone #	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	

CR2E034 (10/02)

Attachment

80142550
P02000038326

Mor USA Inc
2157 NW 79th Avenue
Miami, FL 33122

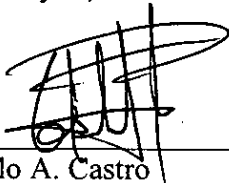
August 27th, 2003

RE: UBR Report 2003
Document No.: P02000038326
FEI No.: 02-0581221

To Whom It May Concern:

I am asking if you can please waive the late fee of \$400.00. I did not receive the prior notice of the Uniform Business Report (UBR) to pay before May 31st, 2003 due to the fact that the business moved to another location. If you can check your records in your Mail Department to check if the prior notice of the UBR was returned. Enclosed is a check for \$150.00 and I apologize for any inconvenience I have caused.

Thank you,



Pablo A. Castro
President