

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

Page 1 of 2

DOCUMENT # PO2000051631	
1. Entity Name EL PORTAL LATINO, INC.	

FILED
06 JUN -7 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1294 NW 54TH ST		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State MIAMI FL		City & State	
Zip 33142	Country USA	Zip	Country

4. FEI Number 20-4989589	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name YANIS LAVADO	
Street Address (P.O. Box Number is Not Acceptable)	
1294 NW 54TH ST	
City MIAMI	FL Zip Code 33142

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: <i>[Signature]</i>	100076396501 06/20/06--01062--024 ***450.00

January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing ☐ Trust Fund Contribution ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
	PD	YANIS LAVADO	1294 NW 54TH ST MIAMI FL 33142
TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP
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B6/7/04
REINSTATEMENT 64-0

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.	
SIGNATURE: <i>[Signature]</i>	Date: _____

CR200348 (12/02)

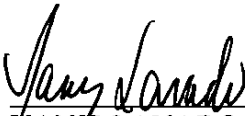
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Division of Corporations
P.O. BOX 6327
Tallahassee, FL 32314

Per instructions from the Division of Corporations, I am attaching a check, in the amount of \$450.00 for the annual report fee with my application.

We did not receive the U.B.R. for the years 2004-2006 or any other notice from the Division of Corporations in respect with the Corporation **EL PORTAL LATINO, INC.**

Thank you for your courtesy in this matter.



YANIS LAVADO
PRESIDENTE