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

## **DOCUMENT #**

P02000052783

1. Entity Name

ROMULEX EXPORT INC.



**FILED** Jan 21, 2003 8:00 am Secretary of State 01-21-2003 90066 012 \*\*\*150.00

Principal Place of Business 7921 NW 67 ST MIAMI FL 33166		Mailing Address 7921 NW 67 ST MIAMI FL 33166				<b>                                    </b>		
2. Principal P	Place of Business	3. Mailing Address	3. Mailing Address					
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES .			
City & Stat	е	City & State	City & State		Number			oplied For
Zip Country		Zip	Country	<b>5.</b> Cer	tificate of Status Desired		3.75 Add e Require	ditional
	6. Name and Address of	f Current Registered Agent		7. Nan	ne and Address of New R		•	
VILLAFUERTE, ROMULO 7921 NW 67 ST MIAMI FL 33166				Street Address (P.O. Box Number is Not Acceptable)				
WIAWI FL	JJ 100		C	у		FL	Zip Code	e
8. The above the obligat	named entity submits this stions of registered agent.  Signature, typed or printed name of reg	atement for the purpose of changing if		ice or registered agent		orida. I am fam	iliar with,	and accept
. After Make Check	ILE NOW!!! FEE IS \$15 May 1, 2003 Fee will be Payable to Florida Depa	\$550.00 \$550.00 rtment of State			Election Campaign Fin Trust Fund Contribution	nancing n. 🗍	Added	<b>0</b> May Be f to Fees
10.	OFFIC P	ERS AND DIRECTORS	11.	ADDIT	IONS/CHANGES TO OFFI			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VILLAFUERTE, ROMULO 7921 NW 67 ST MIAMI FL 33166	☐ Delete	TITLE NAME STREET ADI CITY-ST-Z	F			] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADI CITY-ST-ZI				] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI				] Change	☐ Addition
TITLE Name Street address City-St-Zip	W-20-	☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI				] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADD CITY-ST-ZI	•			] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADD CITY-ST-ZI				] Change	Addition
of the corp	on this report or supplements poration or the receiver or tru:	plied with this filing does not qualify fo al report is true and accurate and that stee empowered to execute this repor address, with all other like empowered	my signature s t as required b	hall have the same lega	d effect as if made under o	ath: that I am a	an officer o	or director I

SIGNATURE: Tomulath

SAHUARY 17, 2003