


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 27, 2004 8:00 am
Secretary of State

09-27-2004 90002 014 ***158.75

DOCUMENT # P02000054716					
1. Entity Name URBAN AREA CORP.					
Principal Place of Business 18081 BISCAYNE BLVD., TORRE 4 N. APT. 301 MIAMI, FL 33160			Mailing Address 18081 BISCAYNE BLVD., TORRE 4 N. APT. 301 MIAMI, FL 33160		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	09222004 Chg-P CR2E034 (10/03)	
4. FEI Number 03-0446084				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired				<input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SERGIO STRATTA, JUAN DOMINGO 9913 N.W. 32ND STREET MIAMI, FL 33172			Name <u>Pepe, Hugo Alberto</u> Street Address (P.O. Box Number is Not Acceptable) <u>18081 Biscayne Blvd Torre 4N, 301</u> City <u>Miami</u> FL Zip Code <u>33160</u>		
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: <u>Hugo A. Pepe</u> DATE: <u>9/22/04</u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEPE, HUGO ALBERTO 18081 BISCAYNE BLVD, TORRE 4N, # 301 MIAMI, FL 33160	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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: <u>Hugo A. Pepe</u>		Date: <u>9/22/04</u>		Daytime Phone #: <u>(305) 933-1014</u>	