

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2003 8:00 am
Secretary of State

09-11-2003 90079 013 ***150.00

0037422 AV

DOCUMENT # P02000055896

1. Entity Name
ZITIES, INC.



Principal Place of Business
1408 NW 82 AVE #C250
MIAMI FL 33126

Mailing Address
1408 NW 82 AVE #C250
MIAMI FL 33126



2. Principal Place of Business

2111 N.W. 79th AVE.

Suite, Apt. #, etc.

SUITE C-250

City & State

MIAMI, FL

Zip

33122

Country

USA

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

02-0603070

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ENRIQUEZ, STEPHEN C
C/O TURNER & ASSOCIATES, CPA'S
19 W FLAGLER ST, STE 600
MIAMI FL 33130

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **DPT**
STREET ADDRESS **PARRA, HUGO**
CITY-ST-ZIP **1408 NW 82 AVE #C250**
MIAMI FL 33126

TITLE ☐ Delete
NAME **DVS**
STREET ADDRESS **LESSEUR, MARIOLGA**
CITY-ST-ZIP **1408 NW 82 AVE #C250**
MIAMI FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

attachment

80147436
PO2000055896

ZITIES, INC.
2111 N.W. 79th AVE., SUITE C-250
MIAMI, FL 33122

Florida Department of State
Division of Corporations

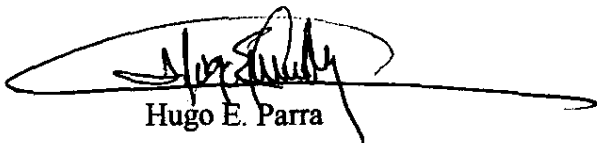
Dear Sir or Madam,

Attached to this letter you will find the requested UBR report filing.

Following the instructions in your booklet, I am writing you instead of filing online to specify that, for some reason, I did not receive your first notice with the May 2nd deadline. Had I received this notice, I would have certainly filed on time.

For this reason, and following your instructions, I am enclosing a check for \$150.00 instead of the \$550 penalty requested in this particular notice.

Sincerely,

A handwritten signature in black ink, appearing to read 'Hugo E. Parra', is written over a horizontal line.

Hugo E. Parra

President

Zities, Inc.