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

DOCUMENT #

P02000057424

1. Entity Name TADDEO CORP.



Principal Place of Business Mailing Address G/O-ROTH-ROUSSO-8-DARRACH, P.A. C/O ROTH, ROUSSO & DARRACH, P.A. 3440-HQLLYWOOD-BLVD-STE-360 -3440-HOLLYWOOD-BLVD-STE-360 HOLLYWOOD FL 33021 HOLLYWOOD-FL-33021-☐ CHECK HERE IF MAKING CHANGES 4. FEI Number Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Age ROTH, LEONARDO A ESQ -·C/O ROTH, ROUSSO & DARRACH, P.A. 3440 HOLLYWOOD BLVD STE 360. -HOLLYWOOD-FL 3302-1 8. The above named entity submits this sta tement 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 regi SIGNATURE _ nted name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ODITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITI E TRODEO, NECTOR Change ☐ Addition TITLE ☐ Delete FLEIX TADDEO, HECTOR KAST FLACUER ST, SUITE 1534 NAME" NAME 3440 HOLLYWOOD BLVD STE 360 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FL 33131 HOLLYWOOD FL 33021-CITY-ST-ZIP Change ☐ Dēlete THLE TITLE NAME JAVIER TADDEO, PABLO NAME PAST FLAGER ST, SUITE 1634 3440 HOLLYWOOD BLVD STE 360 STREET ADDRESS STREET ADDRES HOLLYWOOD FL 33021 CITY-ST-7IP CITY-ST-7IP FC 33131 Change 💢 TITLE Delete TITLE DOBO, LEONARDO G GABRIEL TADDEO, LEONARDO NAME NAME EAST PLAGER ST, SUITE 3440 HOLLYWOOD BLVD STE 360 STREET ADDRESS STREET ADDRESS CITY-ST-7IE HOLLYWOOD FL 33021 CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP report/is

 I hereby certify that the information indicated on this report or suppler of the corporation or the receiver. ied with his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 are explored 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 w

SIGNATURE:

HE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

FILED

05-01-2003 90978 020 ***150.00

May 01, 2003 8:00 am g Secretary of State

CR2E034 (10/02)