2003 FOR PROFIT CORPORATION

20 UN	003 FOR PROFI	T CORPOR	ATION T (UBR)	FILED Sep 11, 2003 8:00 a	ım	
DOCUMENT # P02000067228 VENETIAN PLASTER, INC.			2007	Secretary of State 09-11-2003 90082 029 ***1 50.00		
VENETIA	N PLASTER, INC.	(h) ' 3				
Principal Place of Business 6281 SW 25TH ST. MIAMI FL 33155-3052		Mailing Address 6281 SW 25TH ST. MIAMI FL 33155-3052		ON THE STATE OF TH	aik i es t	
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Number Applied Not App	olicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	41	
	6. Name and Address of Current I	registered Agent	Name	7. Name and Address of New Registered Agent	$\overline{}$	
,PARDO, ANA I 6281 SW 25TH ST.			Street Addres	Street Address (P.O. Box Number is Not Acceptable)		
MIAMI FL 33155-3052			City FL Zip Code			
	named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida. I am familiar with, and a	iccept	
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOT	E: Registered Agent signature requ	ilired when reinstating) DATE	_	
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$750. c Payable to Florida Department of			9. Election Campaign Financing \$5.00 Ma Trust Fund Contribution. Added to Fe		
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	1	
TITLE NAME	PD Pardo, ana I 6281-sw 25th-st	☐ Delete	TITLE NAME	☐ Change ☐	Addition 8	
STREET ADDRESS	MIAMI FL 33155-3052		CITY-ST-ZIP	-		
TITLE NAME STREET ADDRESS	:	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐	Addition Č	
CITY-ST-ZIP		·	CITY-ST-ZIP			
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CITY-ST-ZIP		□ Delete	CITY-ST-ZIP	☐ Change ☐	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	Li Ondrigo Li	ndulion	
CITY-ST-ZIP TITLE NAME		☐ Delete	CITY-ST-ZIP TITLE NAME	· Change	Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ /	Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP			
12. I hereby c	certify that the information supplied with	this filing does not qualify for	r the exemption stated in :	Section 119.07(3)(i), Florida Statutes. I further certify that the information	ation	

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:



90155855 PO200067228

6281 S.W. 25th. Street ♦ Miami,Fl. 33155 Phone 305-343-1263 ♦ Fax 305-662-4885

September 8th. 2003

TO WHOM IT MAY CONCERN.

We never received the prior notice and did not realize that there was a payment due.

We apologize and are enclosing a check for \$150.00.

Thank you

Ana Pardo, President