FILED
May 02, 2003 8:00 am
Secretary of State
05-02-2003 90212 019 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000071847

1. Entity Name
MARPAT ENTERPRISE CORP.

11034032

Principal Place of Business	Mailing Address
915 NW 1 AVE 3013 MIAMI, FL 33136	915 NW 1 AVE 3013 MIAMI, FL 33136

2. Principal Place of Business	3. Mailing Address
1011 BAY DRIVE	1011 BAY DRIVE
Suite, Apt. #, etc. 227	Suite, Apt. #, etc. 227
City & State MIAMI BEACH - FL	City & State MIAMI BEACH - FL
Zip 33141 Country U.S	Zip 33141 Country U.S

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 36-4500824 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
DAVILA, PATRICIO 915 NW 1 STREET 3013 MIAMI, FL 33136	Name MARTIN L. BIANCOTTI Street Address (P.O. Box Number is Not Acceptable) 1011 BAY DRIVE APT 227 City MIAMI BEACH FL 33141

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 _____ V-P 04/28/03
Signature of new registered agent and title if applicable (NOTE: Registered Agent's signature required when changing) DATE

FILE NOW! Fee is $150.00
After May 2, 2003 Fee will be $400.00
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P DAVILA, PATRICIO 915 NW 1 AVE PH 3013 MIAMI,, FL 33136	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BIANCOTTI, MARTIN L 915 NW 1 AVE PH 3013 MIAMI, FL 33136	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT MARTIN L. BIANCOTTI 1011 BAY DRIVE #227 MIAMI BEACH - FL - 33141	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

COR2E034 (10/02)

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: _____ MARTIN L BIANCOTTI P 04/28/03 (786)2551693
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR Date Daytime Phone #