## 2003 FOR PROFIT CORPORATION

		OFIT CORPOR	RATION T (UBR)	FILED Sep 08, 2003 8:00 am Secretary of State
1. Entity Nan		2000074851 <i>G</i>		06-23-2003 90061 008 ***150.00
	ce of Business HEAST 15TH COURT 79	Mailing Address 20086 NORTHEAST 15TH MIAMI FL 33179	I COURT	55056044
2. Principal F	Place of Business	3. Mailing Address		* 1002:1007 111 00110 11071 00311 00315 00115 00115 00115 0116 01107 01107 01107 11071
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & Stat	te .	City & State		4. FEI Number Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of C	urrent Registered Agent	Name	7. Name and Address of New Registered Agent
SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST.		Street Addre	ss (P.O. Box Number is Not Acceptable)	
4TH FLOOR				
MIAMI FL 33145			City	FL Zip Code
	tions of registered agent.			stered agent, or both, in the State of Florida. I am familiar with, and accept
F	Signature, typed or printed same of registers		E: Registered Agent signature rec	
	ptember 10, 2003 Fee will be k Payable to Florida Departm			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees
10.	<del>                                     </del>	AND DIRECTORS	11,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-S7-ZIP	PTD POPE, TRAVIS E 20086 NORTHEAST 15TH ( MIAMI FL 33179	Delete	NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD DELGADO, ALEX 20086 NORTHEAST 15TH ( MIAMI FL 33179	☐ Delete	TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	☐ Change ☐ Addition ☐
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby of indicated of the correctanged,	pertify that the information supplied on this report or supplemental re poration or the receiver or trusted or on an attachment with an add	d with this filing does not qualify fo port is true and accurate and that r empowered to execute this report ress, with all other life empowered	r the exemption stated ir ny signature shall have t as required by Chapter	Section 119.07(3)(i), Florida Statutes. I further certify that the information he same legal effect as if made under oath; that I am an officer or director 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

SIGNAFORE AND TREE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 733-1657 Daytime Phone #

To Whom it Concerns, I TRAVIS Pope President of 14 HR MARINE SENT THE AMOUNT OF 150\$ FOR THE 003 UNIFORM BUISNESS REPORT, I AM NOW INFORMED hat the department HAS Recieved it LATE. Due to Past Problems with Recieving My Mail at this ocation, (wich I have Contacted the United States 3st Office Prout) I Contacted the Division of corperations and HAD A New Report Form Sent I Filled it out and Included 150\$

If ANY FURTHER QUISTIONS Please CALIME A.S.A.P. @ 305 733-1657

attachment

#p0200074851