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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000074914 L. Entity Name LUPAL, INC.					03	FILEI SEP 18		6	
Principal Piace of Business Mailing Address 2293 S.W. 24TH TERRACE 2293 S.W. 24TH TERRACE NIAMI, FL 33145 NIAMI, FL 33145					SE LA	ECRETARY OF LLAHASSEE.	STATE FLORID	Ä	
2. Principal Place of Business 2600 SOUTH DOUGUAS RD. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.				LES RD.					
City & State		City & State			CHECK HERE IF MAKING CHANGES 4. FEI Number Lipplied For				7
CORAL G		CORAL GABUES, FL						ol Applicable	1
Zip Country 33134 US 6 Name and Address of Current R		33134		ÜS	5. Certificate of Status 7. Name and Address		Fee Require		}
NEGRERIA, ALEJANDRO 2293 S.W. 24TH TERRACE MIAMI, FL 33145				Name Street Address (P.O. Box Number is Not I				
		•		City		FL	Zip Coo	le	1
B. 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									
FUE NOW! FEE IS \$ 150.00° Amerika					9. Election Car	npaign Financing		OD May Be d to Fees	
10.	OFFICERS AND	 _	11.		ADOMONS/CHANGE	S TO OFFICERS AND			¹ ຂ
STREET ADDRESS 2	IEGRERIA, ALEJANDRO 293 S.W. 24TH TERRACE IIAMI, FL 33145	☐ Delete	E .	1			☐ Change	Addition	CRZE034 (10/02)
STREET ADDRESS 2	D RUZ, HECTOR M 293 S.W. 24TH TERRACE NAMI, FL 33145	Delete	# -		800 1 09/24/03	02330; -0101802	□ Change *□□□□ ***75	Addition	CR2
TITLE HAME STREET ADDRESS CITY-ST-ZP	12 40.10	☐ Oeiate	TITLE NAM STRE	-		·	☐ Change	Addition	1
TITLE NAME STREET ADDRESS City-S1-2P	\	☐ Delete	TITLE RAME STRE				☐ Change	Addition	
TITLE HAME STREET ADDRESS GITY-ST-ZP		☐ Delete	TALE NAME STAB	:			☐ Change	Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZP		☐ Delete	TRLE NAME STRE		5-ya	\$	☐ Change	Addition	
12. Thereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicated on this report or supplierpental 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 receiper 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: ALEXANDRO NEGRETICA									

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LUPAL, INC.

TO WHOM IT MAY CONCERN: TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE FOR 2003 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY

ALEJANDRO NEGREIRA

PRESTNENT