

103

UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

03 MAY 21 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000077828			
1. Entity Name URRACA, INC.			
Principal Place of Business		Mailing Address	
2. Principal Place of Business		3. Mailing Address	
21 201 Alhambra Circle Suite, Apt. #, etc.		26 Suite, Apt. #, etc.	
22 Suite 705		27 City & State	
City & State		4. FEI Number	
23 Coral Gables FL		48-1277014	
Zip		County	
24 33134		25	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Gonzalez & Associates, P.A. 201 Alhambra Circle Suite 705 Coral Gables, FL 33134		81 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 FL	
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so <input type="checkbox"/>		10. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May be added to Fees	
FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pedro A. Gonzalez	1.2 NAME	
STREET ADDRESS	201 Alhambra Circle Suite 705	1.3 STREET ADDRESS	
CITY-ST-ZIP	Coral Gables, FL 33134	1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	400019677324
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
13. I do 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 annual report or supplemental annual 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 11 or Block 12, or on attachment with an address.			
SIGNATURE _____		Pedro A. Gonzales President	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	
		Daytime Phone #	

2003 UBR

FEI # + title as per Kim w/ Florida Filings
5/23/03

2003

Florida Filing & Search Services
1333 North Duval Street
Tallahassee, FL 32303

Re: URRACA, INC.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. check payable to Florida Department of State \$150

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you. (2003 UBR)

By: Valerie Cine
by V. Cine as attorney-in-fact
Name: PEDRO A GONZALEZ
Title: President
Date: 5/19/03

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FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 05-21-03

NAME: URRACA, INC.

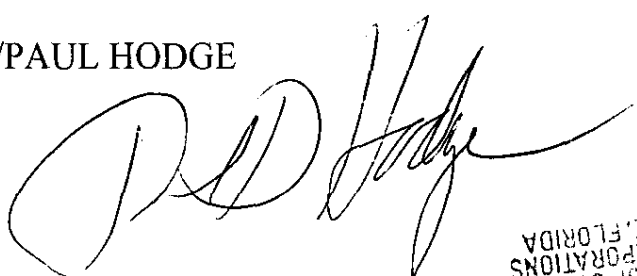
TYPE OF FILING: UBR

COST:

RETURN:

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE



RECEIVED
03 MAY 21 AM 11:29
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA