

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000079343

Entity Name: OROZCO REALTY, INC.

FILED
Feb 12, 2003
Secretary of State

Current Principal Place of Business:

15604 NW 37 AVE
OPA LOCKA, FL 33054

New Principal Place of Business:

1790 W 49 STREET
305-8
HIALEAH, FL 33012

Current Mailing Address:

15604 NW 37 AVE
OPA LOCKA, FL 33054

New Mailing Address:

FEI Number: 30-0124714

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OROZCO, SALVADOR C
15604 NW 37 AVE
OPA LOCKA, FL 33054

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OROZCO, SALVADOR C
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D () Delete
Name: OROZCO, BLANCA
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D () Delete
Name: SANTAMARIA, YANETT
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change () Addition
Name: OROZCO, SALVADOR C
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: VP D (X) Change () Addition
Name: OROZCO, BLANCA
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: T D (X) Change () Addition
Name: SANTAMARIA, YANETT
Address: 15604 NW 37 AVE
City-St-Zip: OPA LOCKA, FL 33054

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALVADOR C OROZCO

P D

02/12/2003

Electronic Signature of Signing Officer or Director

_____ Date