

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT 16 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000095717

1. Entity Name

FUN TO PHONE SOLUTIONS, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2801 BISCAYNE BLVD.		3. Mailing Address 2801 BICAYNE BLVD.	
Suite, Apt. #, etc. SUITE 403		Suite, Apt. #, etc. SUITE 403	
City & State AVENTURA, FLORIDA		City & State AVENTURA, FLORIDA	
Zip 33280	Country USA	Zip 33280	Country USA

000024215430
10/28/03--01073--004 **300.00
DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

4. FEI Number 06-1649845	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
7. Name and Address of Current Registered Agent	
Name RANDALL L SIDLOSCA	
Street Address (P.O. Box Number is Not Acceptable)	
999 PONCE DE LEON BLVD. SUITE 660	
City CORAL GABLES	FL Zip Code 33134

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 Randall L Sidlosca 10/14/03
Signature typed or printed name of registered agent and this is electronic. (NOTE: Registered agent signature required when resigning.)

January 1 - May 1 Fee is \$150.00 After May 1: Fee is \$500.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DORIS ESPINOZA - DIRECTOR 2801 BISCAYNE BLVD., SUITE 403 AVENTURA, FLORIDA 33280	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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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 on an attachment with an address, with all changes empowered.

SIGNATURE: [Signature] 10/14/03 786-426-8046
SIGNATURE IS TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2ED034B (12/02)

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

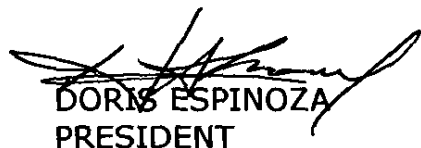
TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003
UNIFORM BUSINESS REPORT. I **HAVE** CHANGED MY PRINCIPAL OR MAILING
ADDRESS SINCE I INCORPORATED.

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS
ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

CORDIALLY


DORIS ESPINOZA
PRESIDENT