2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

FILED Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90234 010 ***150.00

DOCUMENT # P02000096131 1. Entity Name							04-25-2003 90234 010 ***150.00				
Miami I	Legal Investiga	tions	s, Inc.	/							
DO NOT WRITE IN THIS SPACE							11016691				
2. Principal P	lace of Business	3. Ma	iling Address		<u>.;;.</u>			÷			
	2nd Ave	1	.E. 2nd	Ave							
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
Suite 2 City & State			<u>te 200</u> y & State				4. FEI Number		_	Analisa Faci	
Miami,			mi, FL				52-237 <u>5</u> 791		H	Applied For Not Applicable	
Zip	Country	Zip	-	Countr				· ¬ \$8.	.75	Additional	
<u> 33132-2</u>	2500 USA 🔩 🕒 🚉		32 <u>-2500-</u>	<u>USA</u>			5. Certificate of Status Desired	~ ~Fee	Rec	uired	
	DO NOT WRITE IN	THIS SI	PACE		Name	7.	Name and Address of Current	Registered A	ent		
					Name Reve	ros	Yadira				
. As					Street A	ddress (P.O. Box Number is Not Acceptab	ole)		ı	
					1010)3 S	.W43rd St.	<u>_</u>			
		i + '			ļ						
*		,			City Mian			FL Z	ip Co	ode L 8 5	
Q. The above	named entity submits this statem	ant for the r	urnee of changin	o ito co			gistored agent or both in the Sta				
SIGNATURE_	the obligations of registered age										
	Signature, typed or printed name of rec	istered agent	t and title if applicable	∋ . (l	NOTE: Regi	stered Age	ent signature required when reinstating	1)	DATE		
	nuary 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Payable to Florida Department	of State					Election Campaign Final Trust Fund Contribution			5.00 May Be dded to Fees	
10.	OFFICERS AND		RS				 			1	
TITLE NAME STREET ADDRESS	D/P/S/T Reyeros, Yadir 16103 S.W. 43r	d St.			E Et adoress				*****		
CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP	Miami, FL 3318	<u> </u>		TITLE NAME STRE	3.157			diniby dinaba.	- <u></u>		
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information an officer o	rtify that the information supplied indicated on this report or supple r director of the corporation or the Block 10 or on an attachment with IRE:	mental report receiver or an address	ort is true and accu trustee empowere s, with all other like	urate an ed to exe e empor	d that my secute this reversed.	signature report as	shall have the same legal effect required by Chapter 607, Florida	as if made und Statutes; and t	er oa hat n	th: that I am	