FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED

03 DEC -8 AM 11:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000112995

1. Entity Name

FERNANDO MOLDINGS, INC.

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 03

2. Principal Place of Business	3. Mailing Address
6320 GRANT COURT	6320 GRANT COURT
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: HOLLYWOOD, FL	City & State: HOLLYWOOD, FL
Zip: 33024 Country: US	Zip: 33024 Country: US

4. FEI Number 02-0647851 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: FERNANDO MUÑOZ

Street Address (P.O. Box Number is Not Acceptable):

6320 GRANT COURT

City: HOLLYWOOD FL Zip Code: 33024

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: X Rosa Munoz 12/4/03

Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

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

10. OFFICERS AND DIRECTORS

TITLE: D/P NAME: Fernando Munoz STREET ADDRESS: 6320 Grant Court CITY-ST-ZIP: Hollywood, FL 33024	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: 300024706463 11/14/03--01047--008 **158.75
TITLE: D/S NAME: Rosa Munoz STREET ADDRESS: 6320 Grant Court CITY-ST-ZIP: Hollywood, FL 33024	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP: **DO NOT WRITE**
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CR2E034B (12/02)

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 other like empowered.

SIGNATURE: X 12/4/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

November 11, 2003

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32134

Reference: Fernando Molding, Inc.
2003 Corporation Profit Annual Report

Taxpayer's Assistance:

We are submitting our corporate annual report accompanied by our check in the amount of $158.75 as instructed to us, by telephone, by the Department of State. We moved and did not receive our corporate annual report for the year 2003.

Please apply the fees to our 2003 corporate annual report and $8.75 for our recertification certificate.

Thanking you in advance for your assistance.

Sincerely yours,
Fernando Munoz

Fernando Molding, Inc.
President