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

## FILED Mar 12, 2003 8:00 am Secretary of State

UN	IIFOR	M BUSIN	ESS REPOR	T (L	JBR)	2/(	Secretai	y of	State	
1. Entity Na		NCE CORPORAT					02-06-2003 90071 00 <sup>2</sup>		<b>4 ***15</b> 0.00	
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2. Principal Place of Business 3. Mailing Addre						-{ [{\begin{align*}		I HELD VALUE (1866)	DIAND THUS IDDA	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1	CHECK HERE IF MAKIN	G CHANGES	3	
City & State			City & State			4. Fig Number 1982890 Applied For Not Applicable				
Zip		Country	Zip	Count	ry	5. Certificate	of Status Desired	\$8.75 Ad	ditional	
	6. Name	and Address of Curren	t Registered Agent	1 1	<del></del>	7 Name and	Address of New Registered	·	-	
-					Name					
PEFIA, LUIS HERNANDO					LUIS H. PENA					
·			•		Street Address	P.O. Box Numbe	r is Not Acceptable)	<i>y</i>		
19551 DIPLOMAT DRIVE NORTH MIAMI BEACH FL 33179					Street Address (P.O. Box Number is Not Acceptable)  1955 DIPLOMAT DR					
NUKIH M	IIAMI BEAUI	1 FL 33179							1.	
					City NORTH MIGNI BEACH FL ZIP COde 33179					
8. The above	e named entity tions of regist	y submits this statement f	or the purpose of changing its	registere	d office or register	ed agent, or bott	h, in the State of Florida. I an	n familiar with,	and accept	
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SIGNATURE		T	Luis	H 1	RNA		1/9	103	. ]	
	Signature, typed	or printed name of registered agen	t and title if applicable. (NOTE	: Registered	Agent signature required	when reinstating) ,	DATE			
F	ILE NOW!!	! FEE IS \$150.00 3 Fee will be \$550.00	850 2000 500 5000 1000		,	9. Ele	ction Campaign Financing	\$5.0	O May Be	
Make Check	k Payable to	Florida Department o	of State projections			' Trus	st Fund Contribution.		to Fees	
10.	OFFICERS AND DIRECTORS			11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
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12. I hereby certify that the information surplied with this filling 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANTURE REQUIZED H PENA

1/4/03

305-513-0888

Daytime Phone #