2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000128152

NATIONAL PROPERTY HOLDINGS, INC.



FILED Jun 11, 2003 8:00 am Secretary of State

06-11-2003 90060 031 ***550.00

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Principal Plac 7700 NW 37TI MIAMI FL 331	H AVENUE	S	7700	Mailing Address 7700 NW 37TH AVENUE MIAMI FL 33147								
2. Principal F	Place of Busin	ess	3. Mai	ling Address				!				
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City	City & State				FEI Number 04-37355	17	⊢	oplied For	7
Zip Country			Zip	Zip Country			~5. (Certificate of Status Desired		\$8.75 Add	ditional	1
	6. Name	and Address of Curren	t Registere	ed Agent			7. 1	Name and Address of New	Registered /	Agent		1
- 44		سريد در خور پ				Name						1
VALDES,	CARLOS A		•	•				lox Number is Not Acceptab				١
7700 NW	37TH AVEN	IUE			ļ			- Training in the trace option]
MIAMI FL	33147											١
						City			FL	Zip Cod	e	1
8. The above the obligat	named entity tions of regist	submits this statement f ered agent.	or the purp	ose of changing its	registere	d office or re	egistered ag	ent, or both, in the State of F	lorida. I am i	amiliar with,	and accept]
SIGNATURE .	Signature, typed	or printed name of registered agen	t and title if appl	licable. (NOTE	Registered	Agent signature	required when re	pinstating)	DATE			
F Afte	ILE NOW!! r May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00 Florida Department of						Election Campaign F Trust Fund Contributi	· -		0 May Be I to Fees	1
10.		OFFICERS AND	DIRECTO	RS	11.		AD	DITIONS/CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	1
NAME STREET ADDRESS CITY ST-ZIP	PD VALDES, 0 7700 NW : MIAMI FL	37TH AVENUE		☐ Delete		T ADDRESS ST-ZIP				☐ Change	☐ Addition	
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-835-7600