


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

FILED
Aug 17, 2004 8:00 am
Secretary of State

08-17-2004 90001 040 ***150.00

DOCUMENT # P03000036203	
1. Entity Name THREE FORKS HOLDINGS, INC.	

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 418 ALMINAR AVENUE Suite, Apt. #, etc.	3. Mailing Address 418 ALMINAR AVENUE Suite, Apt. #, etc.
--	--

54068511

DO NOT WRITE IN THIS SPACE

City & State CORAL GABLES, FL	City & State CORAL GABLES, FL	4. FEI Number 02-0687417	Applied For <input type="checkbox"/> Not Applicable
Zip 33146	Country USA	Zip 33146	Country USA
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name JORGE BLET	
Street Address (P.O. Box Number is Not Acceptable) 245 CANDIA AVENUE	
City CORAL GABLES, FL	Zip Code 33144

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  **JORGE BLET** **08/11/04**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing.) DATE

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	VD CARLOS D AMO 2672 SW 118th CT MIAMI, FL 33175	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JORGE BLET 245 CANDIA AVENUE CORAL GABLES, FL 33144	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD JOHN NARANJO 418 ALMINAR AVENUE CORAL GABLES, FL 33146	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GISELLE D AMO 2672 SW 118th CT MIAMI, FL 33175	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MARIA BLET 245 CANDIA AVENUE CORAL GABLES, FL 33144	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ANEL NARANJO 418 ALMINAR AVENUE CORAL GABLES, FL 33146	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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:  **ANEL NARANJO - VD** **8/11/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

Attachment

54068571

THREE FORKS HOLDINGS, INC.

**418 ALMINAR AVENUE
CORAL GABLES, FL 33146
(305) 271-7310**

August 11, 2004

**Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314**

Re: Doc # P03000036203

Dear Sir:

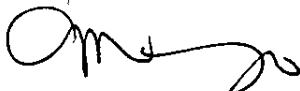
Enclosed please find a check for \$150.00 to cover the annual report fee for CY 2004 along with a completed UBR form. I never received the form.

Please accept this check in good faith. We are a new company, and I was not aware of the form until my accountant brought it up to my attention.

I sincerely hope that you would take this into consideration.

Thank you.

Very truly yours,



**ANEL NARANJO
VD**