2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 10, 2006 8:00 am Secretary of State 04-10-2006 90339 040 ***158.75

DOCUMENT # P03000049850 1. Entity Name U & L MARKETING & ACCOUNTING SERVICES, INC.					04-10-2000 90559 040 *** 138.75					
Principal Place of Business 615 82ND STREET SUITE 3 MIAMI BEACH, FL 33141		Mailing Address 615 82ND STREET SUITE 3 MIAMI BEACH, FL 33141		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1] 					
2. Principal Place of Business 10190 E BAY HARBOR 10190 E B			Y HAR	BOR	[] 					
Suite, Apt.	TE F8		8		03022006	Chg-P	CR2E03	34 (11/05)		
	MI BEACH, FL.	City & State MIAMIBE	ACH,	FL	4. FEI Numb 42-159			No	oplied For ot Applicable	
Zip 3315	Country	zip 33154	Country		<u> </u>	of Status Desired		68.75 Add ee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name						
URBINA ARANGUREN, GONZALO E 615 82ND STREET SUITE 3 MIAMI BEACH, FL 33141				Street Address (P.O. Box: Number is Not Acceptable) 10190 EAST BAY HARBOR						
				DY STE F8						
					MI BE	· '	FL		154	
8. The above named entity submits this statement or 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
•	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE:	: Hegistered Agent si	gnature required	1 when reinstating)	<u> </u>	DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaig Trust Fund Contri			.00 May Be led to Fees					
10.	OFFICERS AND D		11.		ADDITIONS	/CHANGES TO OF		_		
NAME STREET ADDRESS CITY-ST-ZIP	URBINA ARANGUREN, GONZAL 615 82ND STREET SUITE 3 MIAMI BEACH, FL 33141	☐ Delete O E	TITLE NAME STREET ADDRE CITY-ST-ZIP			BEACH,	OR DY		1	
TITLE	D	☐ Delete	TITLE	1-7-7	,,,,-,,	ULACO)	<i>)</i> <u> </u>	☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	LOZANO HERNANDEZ, PEDRO . 615 82ND STREET SUITE 3 MIAMI BEACH, FL 33141	JAVIER	NAME STREET ADDRE CITY-ST-ZIP	1 '		BAY HAR			_	
TITLE	MIAMI DEACH, I'E 33141	☐ Delete	TITLE		HW! I	BEACH,	FLI	ンクノン Change	Addition	
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TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRE	ss				☐ Change	Addition	
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP					☐ Change	☐ Addition	
NAME STREET ADDRESS CHTY-ST-ZIP			NAME STREET ADDRE CITY-ST-ZIP	ss						
TITLE NAME		☐ Delete	TITLE NAME					☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRE	ss		<u>.</u>		<u> </u>		
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 attact urent with an address, with all other like empowered.										

03-06-06

Daytime Phone #