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Mar 31, 2004 8:00 am
Secretary of State

03-11-2004 90019 034 ***150.00

3/11/2

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000124934

1. Entity Name
UNITED OUTSOURCING PATENT ENTERPRISES INC.

66408907

Principal Place of Business
9429 SW 16 STREET APT W23
MIAMI, FL 33173

Mailing Address
9429 SW 16 STREET APT W23
MIAMI, FL 33173

02292004 Chg-P CR2E034 (10/03)

2. Principal Place of Business		3. Mailing Address	
9429 SW 76 St		9429 SW 76 St	
Suite, Apt. #, etc. W16		Suite, Apt. #, etc. W16	
City & State Miami FL		City & State Miami FL	
Zip 33173	Country USA	Zip 33173	Country USA

4. FEI Number 03-0375415 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
HERNANDEZ, WILLIAM
9429 SW 16 STREET APT W23
MIAMI, FL 33173

7. Name and Address of New Registered Agent
Name Wilfredo Uztariz
Street Address (P.O. Box Number is Not Acceptable) 9429 SW 76 apt W16
City Miami FL Zip Code 33173

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 William Hernandez President William [signature] 03/01/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HERNANDEZ, WILLIAM 9429 SW 16 STREET APT W23 MIAMI, FL 33173	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pd William Hernandez 9429 SW 76 apt W16 Miami FL 33173	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Pd Wilfredo Uztariz 9429 SW 76 apt W16 Miami FL 33173	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: William [signature] Pd William Hernandez 03/01/04 (305) 8157339
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #