

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

FILED
Aug 04, 2005 8:00 am
Secretary of State

08-04-2005 90002 017 ***150.00

DOCUMENT # P04000038596	
1. Entity Name	
BISSCO CORPORATION	

DO NOT WRITE IN THIS SPACE

50059834

2. Principal Place of Business 201 W 50 ST		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State HIALEAH, FL		City & State	
Zip 33012	Country	Zip	Country

DO NOT WRITE IN THIS SPACE


4. FEI Number 20-1612519		Applied For <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name ABEL FERIA	
Street Address (P.O. Box Number is Not Acceptable) 201 WEST 50 ST	
City HIALEAH	FL
Zip Code 33012	

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  **ABEL FERIA** **8/1/2005**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FERIA, ABEL 201 W 50 ST HIALEAH, FL 33012
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:  **ABEL FERIA, PRESIDENT** **8/1/2005** **(305) 479-5946**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

ATTACHMENT
BISSCO CORPORATION
201 West 50th Street, Hialeah, FL 33012

50059834

August 1, 2005

Florida Department of State
P O Box 6327
Tallahassee, Florida 32314

Subject: BISSCO CORPORATION

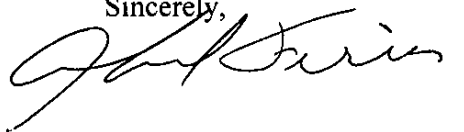
Ref: P04000039596

Enclosed please find the 2005 Annual Report, along-with the payment of \$150.00

We wish to request a waiver of the late fee, because we are not acquainted with the methodology and did not receive any information about the steps to follow.

We thank you for your understanding.

Sincerely,

A handwritten signature in black ink, appearing to read "Abel Feria", written over a faint circular stamp.

Abel Feria
President