02/06/2006 03:07 850-245-6061 FISCAL PAGE 02/03

2005-2006

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FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 FEB 21 PM 3:22

DOCUMENT # P0.4000165223.

1. Entity Name
LA RUMBA.

700066263897
02/21/06--01027--002 **150.00
700066263897
02/21/06--01027--001 **165.50

DO NOT WRITE IN THIS SPACE

REINSTATEMENT 05-06

2. Principal Place of Business	3. Mailing Address
685 Washington Ave	685 Washington Ave
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami Beach	City & State: Miami, FL
Zip: 33139 Country: USA	Zip: 33139 Country: USA

4. FEI Number: 34-2026439 (Applied For / Not Applicable)

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Rafael Arias

Street Address (P.O. Box Number is Not Acceptable): 8858 NW 152 Terr

City: Miami Lakes. FL Zip Code: 33018

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: [signature] 2/6/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Date

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	P- President Rafael Arias 8858 NW 152 Terr Miami Lakes FL 33018
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: [signature] 2/6/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Per Scot Bailey 2/21/06

1/31/06

To whom it may concern;

I'm writing reference # P04000165223 La Rumba Corp we had a problem last year the check was returned because the account was close when I called the bank they told me all the check has been cleared I apologise For the incorinience I'm enclosing a money order OF $65.50 IF You have any questions do not hesitate to call me. 786 306 3317

Thank You
Rafael Arias