## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P40483

1. Entity Name

INTERNATIONAL WAREHOUSES LTD. COMPANY



FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90344 009 \*\*\*150.00

						5						
Principal Place of Business 8280 NW 66TH ST. MIAMI FL 33166			Mailing Address 8280 NW 66TH ST. MIAMI FL 33166									
2. Principal Place of Business			3. Mailing Address									-
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State			City & State		4.	4. FEI Number 65-0326261			Applied For Not Applicable			
Zip Country			Zip	Coun	try	5.	5. Certificate of Status Desired S8.75 Additional Fee Required			ditional	1	
	6. Name and A	Address of Current F	Registered Agent			7.	7. Name and Address of New Registered Agent					1
					Name							1
	, ANTHONY CPA	l	Street Address			iress (P.O. 6	(P.O. Box Number is Not Acceptable)					1
8180 NW SUITE 100												1
MIAMI FL	33166				City			FL	Zip Cod	е	1	
	ions of registered a		the purpose of changing its		ed office or re				l am fan	niliar with,	and accept	
After Make Check	ILE NOW!!! FE May 1, 2003 Fe Payable to Flori	E IS \$150.00 e will be \$550.00 da Department of	State			- · ·	9. Election:Campa Trust Fund Con	tribution.		Added	May Be I to Fees	
10.	- T	OFFICERS AND [	DIRECTORS	11.		Αί	DDITIONS/CHANGES	O OFFICERS				ے ا
THLE NAME STREET ADDRESS CHY-ST-ZIP	DC QUESADA-RAZ 8280 NW 66TH MIAMI FL		☐ Delete							] Change	☐ Addition	F034 (10/02)
NAME STREET AODRESS CITY-ST-ZIP	D ESPINO, SILVIA H. 8280 NW 66TH ST. MIAMI FL		☐ Delete							] Change	☐ Addition	3
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S QUESADA-HERNANDEZ, S. 8280 NW 66TH ST. MIAMI FL		☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				Ε	] Change	☐ Addition	-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS TURKS AND CA DUKE ST. TURKS AND CA		☐ Delete							] Change	Addition	
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CITY-ST-ZIP TITLE NAME			☐ Delete	CITY- TITLE NAME	1					] Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				STREI City-	ET ADDRESS ST-ZIP		······································					
12. I hereby o	certify that the inform	nation supplied with	this filing does not qualify fo	r the exer	nption stated	In Section	119.07(3)(i), Florida Sta	atutes. I furthe	er certify	that the in	ntormation	{

2. 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:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/03 (305)592-870