## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

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SIGNATURE:

th an address, with all other like empowered.

## Mar 17, 2004 8:00 am Secretary of State DOCUMENT # P92000011027 1. Entity Name 03-17-2004 90011 027 \*\*\*150.00 TUBER, INC. Principal Place of Business Mailing Address 1835 SW 27TH AVENUE PO BOX 331885 **MIAMI FL 33145 MIAMI FL 33233** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUBERT MORENO, ALBERT 1835 SW 27TH AVENUE **MIAMI FL 33145** City 1/AM/ 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 postered agent. Hoza HUBERTO MONERO SIGNATURE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. TITLE TITLE PD ☐ Delete Change Addition MORENO, ALBERT MORENO, ALBERT NAME NAME 1835 SW 27 AVE STREET ADDRESS STREET ADDRESS 1255W 13000 CITY-ST-ZIP **MIAMI FL 33145** CITY-ST-ZIP 331FY MIDMI, FL Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IF CITY-ST-7IP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Delete TITLE TITLE [ ] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

ALBERTO MONERO 3/10/OV (305) 960-0060

FILED