

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

DOCUMENT # P93000026378		
1. Entity Name SCHROTH INTERNATIONAL, INC.		

Principal Place of Business 305 GALEN DRIVE, #109 KEY BISCAIYNE, FL 33149	Mailing Address P.O. BOX 490565 KEY BISCAIYNE, FL 33149 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



000020967250
06/18/03--01039--020 **158.75

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent RESTREPO, BEATRIZ 305 GALEN DRIVE, #109 KEY BISCAIYNE, FL 33149		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent's signature required when submitting) DATE _____

FILE IN WITH FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	D SCHROTH, WALTER 326 LUIS FELIPE VILLARAN SAN ISIDRO, LIMA, PERU, ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SM RESTREPO, BEATRIZ 305 GALEN DRIVE, #109 KEY BISCAIYNE, FL 33149 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ 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
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: *Beatriz Restrepo* 5/31/03 305-308-7686
DATE DAYTIME PHONE #

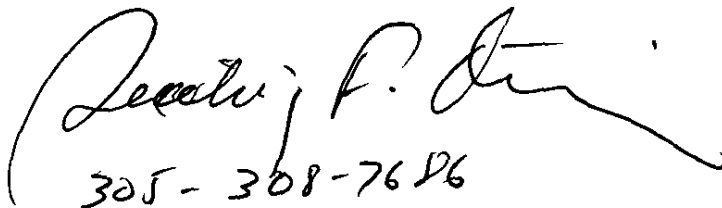
CR20034 (10/02)

MAY 31, 2003

RE: UBR RENEWAL 2003
CERTIFICATE OF STATUS - GOOD STANDING

PLEASE WAIVE THE PENALTIES FOR
FILING LATE. I NEVER RECEIVED THE
UBR FORM.

Sincerely,


305-308-7686

Charter Number Only

VALIDATION ONLY

06/02/03

Beatriz Restrepo

Requestor's Name

290 Sunrise Dr., Apt. 2F

Address

Key Biscayne, FL 33149

City

State

ZIP

Phone

(305) 365-2489

3694 X

CORPORATION(S) NAME

Schroth International, Inc.

#P93000020378

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☒ Annual Report

☐ Reservation

☐ Other

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☒ Certificate Under Seal

☐ Call When Ready

☒ Walk In

☐ Call If Problem

☐ Will Wait

☐ After 4:30

☒ Pick Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W.P. Verifier



Empire Toll Free: 1-800-432-3028