FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P94000019574

UNITED BUSINESS GROUP INC.

Principal Place of Business Mailing Address						1 LOGINOU THE LOUIS CHAIL OF HE A	JILI 68 531 4010 1 ()		BAIT BIBI 1901
7156 SW 47TH ST 7156 SW 47TH ST									
MIAMI FL 33155 MIAMI FL 33155									
						DO NOT WRI	TE IN THIS	SPACE	
						 Date Incorporated or Qualified 03/08/1994 			
2 Driver at Di	and of Business	2a. Mailing Address				4. FEI Number		Ani	olied For
 7	ace of Business)—,			- 1	65-0479137		<u> </u>	Applicable
21 21 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		Suite Ant # etc.	Suite, Apt. #, etc.			 -		\$8.75 A	
22 27		├ -┐				5. Certifcate of Status Desired		Fee Red	l I
		City & State	City & State			6. Election Campaign Financing	- [7] "	\$5.00	May Be
23		28	-			Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	Country	,		8. This corporation owes the curr			
24	25	29 30	<u> </u>			Personal Property Tax.			□No
	9. Name and Address of Current	Registered Agent		1 10		10. Name and Address of New F	Registered A	\gent	
GHE	RRERO, DENNIS		81	Name					
7156 SW 47TH ST			82	Street A	Addres	s (P.O. Box Number is Not Accepta	able)		
MIAMI FL 33155			83	 				 	
11117 (31			03						
			84	City			FL	85 Zip C	ode
At Day with the principle of Certifice 607 0502 and 507 1502 Elevide Statutes the plant and compression submits this statement for the purpose of changing its								registered	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									gistered
SIGNATURE		ANOTE: D	-info-mal Asso	ot ol== -to	naurad w	rhen reinstating)	DATE		{
12.	Signature, typed or printed name of registered agent OFFICERS AND		13:	in oighaidhi e	adas ea e	ADDITIONS/CHANGES TO OF		D DIRECTO	RS IN 12
TITLE	DPT	DELETE	1,1 TITLE					Change	Addition
NAME	GUERRERO, MIREYA G		1.2 NAME	ļ	:				Ì
STREET ADDRESS	7156 SW 47TH ST		1.3 STREE	TADDRESS					{
CITY-ST-ZIP	MIAMI FL 33155		1.4 CITY-5	iT-ŽIP					
TILE			2.1 TITLE	~ .				☐ Change	Addition
NAME	GUERRERO, TULIO D		2.2 NAME	J					J
STREET ADDRESS	7156 SW 47TH ST		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	MIAMI FL 33155 2.4			ST-ZIP					
TITLE			3.1 TITLE			من به خال است در محادر محا	_	Change	☐ Addition
NAME	GUERRERO, DENNIS		3.2 NAME	1					}
STREET ADDRESS	7156 SW 47TH ST		3.3 STREE	T ADDRESS					ļ
CITY-ST-ZIP	MIAMI FL 33155		3.4. CITY-	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME	1					}
STREET ADDRESS			4.3 STREE	T ADDRESS					
CITY-ST-ZIP .			4.4 CITY-5	T-ZIP					
TTLE ·	•	☐ DELETE	5.1 TITLE					Change	Addition
NAME	•		5.2 NAME			·			}
STREET ADDRESS				T ADDRESS					ĺ
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		5.4 CITY-5	IT-ZIP					- Addition
TITLE		☐ DELETE	6.1 TITLE					Change	Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

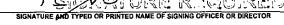
6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP



Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90053 022 ***150.00