

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

**FILED**  
**Sep 18, 2003 8:00 am**  
**Secretary of State**

09-18-2003 90032 004 \*\*\*150.00

**DOCUMENT # P94000070327**

1. Entity Name  
**VILLA URSULA HOME, INC.**



Principal Place of Business  
1528 NW 34 AVENUE  
MIAMI, FL 33125 US

Mailing Address  
3341 NW 34 AVENUE  
MIAMI, FL 33125 US

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0547623** Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LUGO, URSULA**  
3341 NW 34 AVENUE  
MIAMI, FL 33125

Name  
Street Address (P.O. Box Number Is Not Acceptable)  
City **FL** Zip Code

B. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when resigning)

**FILE KNOWLEDGE FEE IS \$150.00**  
After May 1, 2002 Fee will be \$50.00  
Amended SBP 15 4/1/02  
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	<b>P</b> <b>LUGO, URSULA</b> <b>3341 N.W. 18TH TERRACE</b> <b>MIAMI, FL 33125</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>LUGO, TOMAS</b> <b>3341 N.W. 18TH TERRACE</b> <b>MIAMI, FL 33125</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

CFR034 (10/02)

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: *Ursula Lugo* 9/9/03  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment #  
80149120

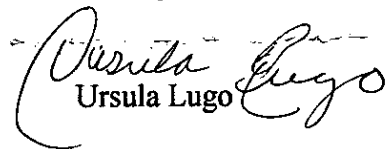
September 11, 2003

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

RE: Document #P94000070327  
Villa Ursula Home, Inc.  
1528 N.W. 34<sup>th</sup> Avenue  
Miami, FL 33125

This is a request to waive late penalty fees to reinstate the above corporation. Due to the fact I never received the UBR Report. In the future I will not wait for my UBR, I will request one from the internet. I am sending along with this letter a check for \$150.00 for 2003 filing fees.

Thank you,

  
Ursula Lugo