## FILED Apr 28, 2003 8:00 am

El Number 65-0527280	Applied For						
00 0027200	Not Applicable						
Certificate of Status Desired   \$8.75 Additional Fee Required							
ame and Address of New Registered Agent							
IN GUILHERME							
ox Number is Not Acceptable)							
vavo FL	Zip Code 3 3 014						
ent, or both, in the State of Florida. I am far	niliar with, and accept						
A	m/m						
41	7S/03						
instating) DATE							
9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees						
9. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND C	Added to Fees						
9. Election Campaign Financing Trust Fund Contribution.	Added to Fees  IRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.	Added to Fees  IRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.	Added to Fees  IRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.   DITIONS/CHANGES TO OFFICERS AND C  FALLAMALE BB #3: LANDALE FL 33009	Added to Fees  IRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND E  FALLAMALE BB #37  LANDALE FL 33009	Added to Fees  IRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND E  FALLAMALE BB #3: LANDALE FL 33009  F. MALLAMALE BB #3:	Added to Fees  DIRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.   DITIONS/CHANGES TO OFFICERS AND E FALLAMALE BB #3: LANDALE FL 33009  F. MALLAMALE BB #3: LANDALE FL 3300	Added to Fees  DIRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.   DITIONS/CHANGES TO OFFICERS AND E FALLAMALE BB #3: LANDALE FL 33009  F. MALLAMALE BB #3: LANDALE FL 3300	Added to Fees  DIRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.	Added to Fees  DIRECTORS IN 11  Change						
9. Election Campaign Financing Trust Fund Contribution.  DITIONS/CHANGES TO OFFICERS AND E  FALLAMALE BB #3: LANDALE FL 33009  F. MALLAMALE BB #3: LANDALE FL 3300	Added to Fees  DIRECTORS IN 11  Change						

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

1. Entity Nam		0076143			04-28-2003 91302 024 ***150.00	
•	e of Business ANDALE BEACH BLVD FL 33009	Mailing Address 1749 E HALLANDALE B.B. 336 HALLANDALE FL 33009 US				
2. Principal Place of Business 1020 CORKWOOD ST 1835 E HALLA NOA			NOALE B.F	3.		
Suite, Apt.		Suite, Apt. #, etc. 336			CHECK HERE IF MAKING CHANGES	
	LYWOOD FL	City & State  MALLANDALE			4. FEI Number 65-0527280 Applied F Not Appli	
330		<sup>Zip</sup> 33009	Country		5. Certificate of Status Desired See Required Fee Required	
<u> </u>	6. Name and Address of Current R	egistered Agent	Name		7. Name and Address of New Registered Agent	
CODETION	LOUBERNE		Indille	GORE	TKIN GUILHERME	
Goretkin, Guilherme 1250 e Hallandale B blvd			Street	Street Address (P.O. Box Number is Not Acceptable)		
	ALLANDALE D BLVD			1020	CORK WOLD SI.	
STE 1008	ALE EL 22000					
HALLAND,	ALE FL 33009		City )_	102.15	y wayo FL   zig cod ny	
		the purpose of changing its r		<u> , , , , , , , , , , , , , , , , , </u>	ed agent, or both, in the State of Florida. I am familiar with, and ac	cept
the obligat	ions of registered agent.	1			1 50	
SIGNATURE Signature, typed or printed name of regists agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
•	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00				9. Election Campaign Financing \$5.00 May Trust Fund Contribution. Added to Fee	
Make Check	Payable to Florida Department of	State			Mast title contribution.	
10.	OFFICERS AND D	RECTORS	11.	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D	☐ Delete	TITLE			ddition
STREET ADDRESS	FERNANDES, MARIA D 1250 E HALLANDALE B BLVD 100	8	NAME STREET ADDRESS CITY-ST-ZIP	1835	S. E HALLAMALE BB #336 ALLANDALE FL 33009	
CITY-ST-ZIP	HALLANDALE FL 33009		<b>!</b>	1	S Annes D As	ddition
TITLE NAME	vsdc Goretkin, Guilherme	Delete	TITLE NAME	100-	TE. WALLAMOALE 38 #336	ddition
STREET ADDRESS	1250 E HALLANDALE B BLVD 100	R	STREET ADDRESS	1 -	,	ļ
CITY-ST-ZIP	HALLANDALE FL 33009	-	CITY-ST-ZIP	h	TALIANDALE FL 33009	- {
TITLE	D	Delete	TITLE		Change 🔲 Ad	ddition
NAME	GORETKIN, ELEONORA N		NAME	1182	JE. HALLANDALE BB#336	Ì
STREET ADDRESS	1250 E HALLANDALE B BLVD 100	8	STREET ADDRESS	1 ' '		
CITY-ST-ZIP	HALLANDALE FL 33009		CITY-ST-ZIP	TVF	ALLANDALE FL 33009	
TITLE NAME	PD SMITH BAY, LEONARD	Delete	TITLE NAME	100	5 E. HALLANDAUE BB #336	ddition
STREET ADDRESS	1250 E HALLANDALE B BLVD 100	8	STREET ADDRESS			
CITY-ST-ZIP	HALLANDALE FL 33009		CITY-ST-ZIP	H	ALLANDAUF FL 33005	
TITLE		☐ Delete	TITLE		☐ Change ☐ Ac	dditien
NAME			NAME			.
STREET ADDRESS			STREET ADDRESS	1		İ
CITY-ST-ZIP			CITY-ST-ZIP	-		Autora -
TITLE NAME		Delete	TITLE NAME		☐ Change ☐ Ad	aition
STREET ADDRESS			STREET ADDRESS			

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP