FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P9400088376 1. Entity Name 03 APR 30 PM 3: 16 HAROLD VALDEZ BAIL BOND, INC. SECRETARY OF STATE TALLAHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 2245 SW 132 AVE 2245 SW 132 AVE Suite, Apt. #, etc. Suite, Apt, #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 65-0539700 MIAMI, FL MIAMI, FL Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 33175 US 33175 US Fee Required 7. Name and Address of Current Registered Agent Name HAROLD VALDEZ DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 2245 SW 132 AVE. City MIAMI Zin Code 33175 The above named entity submits this statement for the purpose of the obligations of registered agent. manging its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE Jenuary 1 - May 1 Fee is \$150,00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. TITLE TITLE (P/D) HAROLD VALDEZ NAME NAME 2245 SW 132 AVE. STREET ADDRESS STREET ADDRESS MIAMI, FL 33175 CITY-ST-ZIP CitY+ST-ZIP TITLE MILE: (V/D) NANCY RODRIGUEZ NAME NAME 2245 SW 132 AVE. STREET ADDRESS STREET ADDRESS MIAMI, FL 33175 CITY-ST-7IP CITY: ST- 7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY: ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CAY-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). Fiorida 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 truefee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with

TITLE

NAMF. STREET ADDRESS

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

4-29-03



TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR 2000 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

<u>CORD</u>IALLY

YAROYD VALDEZ

PRESIDENT