

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 10, 2002 8:00 am**  
**Secretary of State**

05-10-2002 90036 035 \*\*\*150.00

**DOCUMENT # P94000092258**

1. Entity Name  
**RODRIGUEZ & URIARTE P.A**



Principal Place of Business  
**941 FOURTH STREET**  
**#200**  
**MIAMI FL 33139**  
**US**

Mailing Address  
**4521 PGA BLVD.**  
**#211**  
**PALM BEACH GARDENS FL 33418**  
**US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**Miami Beach**

City & State

4. FEI Number **65-0541413**

Applied For  
 Not Applicable

Zip Country

Zip Country

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

**CORPORATE CREATIONS ENTERPRISES INC.**  
**941 FOURTH STREET**  
**MIAMI FL 33139**

Name  
**Corporate Creations Network Inc.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**941 Fourth Street**  
 City **Miami Beach** **FL** Zip Code **33139**

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.

SIGNATURE

*Frank Rodriguez*  
**Frank Rodriguez**  
**CEO**

**1/7/02**

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>P</b>						
	<b>URIARTE, LUIS</b>	<b>941 FOURTH STREET # 200</b>	<b>MIAMI FL 33139</b>				
	<b>CEO</b>						
	<b>RODRIGUEZ, FRANK A</b>	<b>8895 N MILITARY TRAIL #202D</b>	<b>PALM BEACH GARDENS FL 33410</b>				

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** **SIGNATURE REQUIRED** *Frank Rodriguez* **Frank Rodriguez** **1/7/02** **561-694-8107**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **CEO** Date Daytime Phone #

CR2E034 (9/01)