

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000009606

FILED  
Jan 24, 2002 8:00 AM  
Secretary of State

**Entity Name:** LAROYE FAMILY SERVICES, INC.

**Current Principal Place of Business:**

1743 WEST FLAGLER STREET  
MIAMI, FL 33130

**New Principal Place of Business:**

**Current Mailing Address:**

1743 WEST FLAGLER STREET  
MIAMI, FL 33130

**New Mailing Address:**

**FEI Number:** 65-0556299

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MORE, CARIDAD  
1895 N.W. 32ND STREET  
MIAMI, FL US

**Name and Address of New Registered Agent:**

PEREZ, LAZARO C  
1743 W FLAGLER STREET  
MIAMI, FL 33130 US

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:** LAZARO C PEREZ

01/24/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MORE, CARIDAD  
Address: 1895 N.W. 32ND STREET  
City-St-Zip: MIAMI, FL 33142

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: PEREZ, LAZARO C  
Address: 1743 W FLAGLER STREET  
City-St-Zip: MIAMI, FL 33130

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** LAZARO C PEREZ

PD

01/24/2002

Electronic Signature of Signing Officer or Director

Date