

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Feb 02, 1999 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

02-02-1999 90011 041 \*\*\*\*150.00

**DOCUMENT # P95000027039**

1. Corporation Name  
**URBANO ENTERPRISES, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 12941 NW 11 TER, MIAMI FL 33182, US  
 Mailing Address: 12941 NW 11 TER, MIAMI FL 33182, US

3. Date Incorporated or Qualified: **04/05/1995**  
 4. FEI Number: **65-0569579**  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
 6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
 8. This corporation owes the current year Intangible Personal Property Tax:  Yes  No

2. Principal Place of Business (21-24) and Mailing Address (2a-24) details including Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent  
**RODRIGUEZ, VICTOR R**  
**11715 S.W. 18TH STREET, #503**  
**MIAMI FL 33175**

10. Name and Address of New Registered Agent (81-85) fields.

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

12. OFFICERS AND DIRECTORS (DELETE) table with fields for Title, Name, Street Address, City-ST-ZIP.

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 table with fields for Title, Name, Street Address, City-ST-ZIP and Change/Addition checkboxes.

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**

1/9/99 305-638-2596

CR2E034 (11/98)