

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000051722

1. Entity Name

THE DREAM FACTORY, INC.

Principal Place of Business

Mailing Address

9149 COLLINS AVENUE #205  
MIAMI BEACH FL 33154

9149 COLLINS AVENUE #205  
MIAMI BEACH FL 33154

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0592381

Applied For

Not Applicable

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

LEISECA, EDUARDO EA  
9655 SOUTH DIXIE HIGHWAY  
SUITE 207  
MIAMI FL 33156

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

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, 2001 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  
D MUNOZ, VICTORIA LOPEZ  
9149 COLLINS AVENUE #205  
MIAMI BEACH FL 33154 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DICKY LARRAZ  
9149 COLLINS Ave #205  
MIAMI BEACH, FL 33154- ☒ Change ☐ Addition  
(name change)

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
Mar 27, 2001 8:00 am  
Secretary of State

03-27-2001 90037 004 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

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733697

Department of Justice  
Immigration and Naturalization Service

**Petition for Name Change**

United States District Court  
Miami, Florida

(NAME OF COURT)

As part of the naturalization process, you have the opportunity to legally change your name. Please complete lines 1 - 8 (Type or print clearly).

My full and correct name (current name):

1. VICTORIA M LOPEZ MUNOZ  
(FIRST) (MIDDLE) (LAST)

2. Address: 9149 Collins Ave # 205 Surfside, FL 33154  
(Number/Street) (City/State) (Zip Code)

3. Country of Nationality: Spain 4. Date of Birth: 08/26/1962  
(Month) (Day) (Complete Year)

5. Alien Registration Card (Green Card) Number: A 073 709 411

6. I certify that I am not seeking a change of name for any unlawful purpose such as the avoidance of debt or evasion of law enforcement.

7. I petition the court to change my name to:

VICKY  LARRAZ  
(FIRST) (MIDDLE) (LAST)

8. Date: 8/7/2000

Vickie Marie Lopez-Munoz  
Signature of Petitioner (current name)

**CERTIFICATION OF NAME CHANGE**

I CERTIFY THAT THE ABOVE PETITION WAS GRANTED BY THE COURT ON

SEP 19 2000  
(Date)

CLARENCE G. MADDOX II

(Clerk)

[Signature]  
(Deputy Clerk)

**IMPORTANT INFORMATION**

Your copy of this petition, along with your Certificate of Naturalization, which you will receive upon taking the oath of allegiance, will verify that you elected to change your name. Your Certificate of Naturalization bears your new name as changed per Order of the Court.