

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 19, 2003 8:00 am**  
**Secretary of State**

05-19-2003 90212 002 \*\*\*150.00

|   |  |                       |   |                                       |  |
|---|--|-----------------------|---|---------------------------------------|--|
| <b>DOCUMENT # P95000075498</b>  |  |                       |   |                                       |  |
| <b>1. Entity Name</b><br><b>CLUB COLOMBIA, SOUTHWEST FLORIDA</b><br><b>COLOMBIAN AMERICAN ASSOCIATION, INC.</b>   |  |                       |   |                                       |  |
| <b>Principal Place of Business</b><br>1415 SE 14 ST<br>CAPE CORAL, FL 33990   |  |                       | <b>Mailing Address</b><br>P.O. Box 151988<br>CAPE CORAL, FL 33915 |                                       |  |
| <b>2. Principal Place of Business</b><br>2111 EL DORADO PKWY.   |  |                       | <b>3. Mailing Address</b><br>SAME AS SIDE                         |                                       |  |
| Suite, Apt. #, etc.   |  |                       | Suite, Apt. #, etc.   |                                       |  |
| <b>City &amp; State</b><br>CAPE CORAL   |  |                       | <b>City &amp; State</b>   |                                       |  |
| <b>Zip</b><br>33914   |  | <b>Country</b><br>USA |   | <b>4. FEI Number</b><br>65-0632236    |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>  |  |                       |   | <b>\$8.75 Additional Fee Required</b> |  |
| <b>6. Name and Address of Current Registered Agent</b><br>LISZEWSKI, LEONARD L<br>2110 CLEVELAND AVE.<br>FT. MYERS, FL 33901  |  |                       | <b>7. Name and Address of New Registered Agent</b>                |                                       |  |
| Name  |  |                       | Street Address (P.O. Box Number is Not Acceptable)                |                                       |  |
| City  |  |                       | FL Zip Code   |                                       |  |
| <b>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. I am familiar with, and accept the obligations of registered agent.</b>  |  |                       |   |                                       |  |
| <b>SIGNATURE</b> _____ (NOTE: Registered Agent Signature required when resigning)   |  |                       |   |                                       |  |
| Signature, typed or printed name of registered agent and title if applicable.   |  |                       |   |                                       |  |
| DATE  |  |                       |   |                                       |  |
| <b>FILE NOW! - FEE IS \$150.00</b><br>After May 1, 2003 Fee will be \$550.00<br>Make Check Payable to Florida Department of State   |  |                       |   |                                       |  |
| <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |  |                       |   |                                       |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |  |                       |   |                                       |  |
| <b>TITLE</b><br>PD<br><b>NAME</b><br>LOURDES, SARRIA<br><b>STREET ADDRESS</b><br>3226 SW SANTA BARBARA PL<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33914   | <input checked="" type="checkbox"/> Delete                                   |                       |   |                                       |  |
| <b>TITLE</b><br>V<br><b>NAME</b><br>GOMEZ, FERNANDO<br><b>STREET ADDRESS</b><br>1507 SW 20TH AVE<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33991  | <input checked="" type="checkbox"/> Delete                                   |                       |   |                                       |  |
| <b>TITLE</b><br>SD<br><b>NAME</b><br>LIGIA, FLEMING<br><b>STREET ADDRESS</b><br>1814 SW 18TH TERR.<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33991  | <input checked="" type="checkbox"/> Delete                                   |                       |   |                                       |  |
| <b>TITLE</b><br>TD<br><b>NAME</b><br>GONZALEZ, JAIME<br><b>STREET ADDRESS</b><br>2226 SE 1ST<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33990  | <input checked="" type="checkbox"/> Delete                                   |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete  |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Delete  |                       |   |                                       |  |
| <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>  |  |                       |   |                                       |  |
| <b>TITLE</b><br>PD-TD<br><b>NAME</b><br>GOMEZ, FERNANDO<br><b>STREET ADDRESS</b><br>2111 EL DORADO PKWY.<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33914  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |                       |   |                                       |  |
| <b>TITLE</b><br>V-SD<br><b>NAME</b><br>CLAUDIA GOMEZ<br><b>STREET ADDRESS</b><br>2111 EL DORADO PKWY.<br><b>CITY-ST-ZIP</b><br>CAPE CORAL, FL 33914   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                       |   |                                       |  |
| <b>TITLE</b><br><br><b>NAME</b><br><br><b>STREET ADDRESS</b><br><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |                       |   |                                       |  |
| <b>12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.</b> |  |                       |   |                                       |  |
| <b>SIGNATURE:</b> _____   |  |                       |   |                                       |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  |  |                       |   |                                       |  |
| 5/15/03 239-433-5101  |  |                       |   |                                       |  |
| Date Daytime Phone #  |  |                       |   |                                       |  |

CR2E034 (10/02)

*Attachment #*

CLUB COLOMBIA, SOUTHWEST FLORIDA  
COLOMBIAN AMERICAN ASSOCIATION INC.  
2111 EL DORADO PKWY, WEST  
CAPE CORAL, FL. 33914  
941-433-5101  
Fax: 941-433-9424

90136649  
*P95000075498*

May 14, 2003

To: Florida Department of State  
Division of Corporations  
To Whom it may concern:

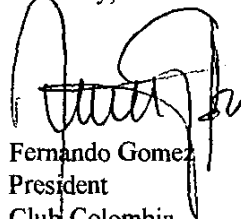
Re: Unpaid Corporation Registration Form  
Document # P95000075498

Please find attached a payment for our corporation registration, we apologize for the delay, it seems that we did not received the forms or we misplace it, we no longer have a secretary and my wife is now handling her duties, we only realize our mistake until now.

Our records proof that we have always file on time, and we are hopping that any penalties be wive at this time.

We would like extend our gratitude for the attention given to this letter, and if you have any questions please call us at 239-433-5101

Thank You ,  
Sincerely,



Fernando Gomez  
President  
Club Colombia