## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Mar 21, 2001 8:00 am Secretary of State DOCUMENT # P96,0000 23942 03-21-2001 90042 033 \*\*\*150.00 BOOK ENTERPHISES, INC 10581 NW56 PCACE 10581 NW 56PLACE CORAL SPRINGS-FL-33076 CORAL SPRINGS FE 33076 A0035367 2. Principal Place of Business 3. Mailing Address 10581-NW56-PLACG Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent zin Cade 076 8. The above ent for the purpose of changing its registered office or registered agent, or both, in the State of Florida SIGNATURE agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation ble to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requ After MAY 1, 2001. Fee will be \$550.00 and elects to do so -Trust Fund Contribution.--Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE ☐ Change ☐ Addition Delete JORGE FERNANDO MESA NAME 10581 NW 56PLACE CORA SPRINGS - R-33076 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE DILE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Defete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information : 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 riof the corporation or the fecelver or truste changed, or on an attachment with an ade and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director led to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if all other like empowered. SIGNATURE: