FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 27, 2002 8:00 am Secretary of State

DOCU 1. Entity Na	JMENT # P9600 -NGENOSO ENTE	COO2450 RPRISES, I	OCE Z	05-27-2002 90327	003 ***150.00
DO NOT WRITE IN THIS SPACE				671598	
2. Principal 594 Suite, Ap	Place of Business 19 TRIPHAMMER RD ot. #, etc.	3. Mailing Address 5949 TRIP Suite, Apt. #, etc.	HAMMER RD	DO NOT WRITE IN THIS	SPACE
7:-		LIZ WORTH	FL 4. FEI Number 65-0654878 Applied For Not Applicab		Applied For Not Applicable
3346	3-1528 Country U.5	33463-1528 CC	US	5. Certificate of Status Desired	\$8.75 Additional Fee Required
				. Name and Address of Current Registered	
	DO NOT W	DITE	Name	HONY INGENOSO	
DO NOT WRITE IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable) 5949 TRIPHAMMER RD		
			The above named entity submits this statement for the purpose of changing its re		
SIGNATURE	Signature, typed or printed name of registered agent an	nd title if applicable. (NOTE: Registr	ered Agent signature required wh		
j 9. Inis corpi	oration is eligible to satisfy its Intangible	January 1 - May 1	Fee is \$150.00	· ·	
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so.	January 1 - May 1 After May 1, Fed Amended UBF Make Check Payable to	e is \$550.00 R is \$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
Tax filing	requirement and elects to do so. aria on back) OFFICERS AND D	After May 1, Fed Amended UBR Make Check Payable to DIRECTORS	e is \$550.00 R is \$61.25 Department of State		
Tax filing (See crite 11. TITLE NAME	requirement and elects to do so. aria on back) OFFICERS AND D	After May 1, Fed Amended UBR Make Check Payable to DIRECTORS	e is \$550.00 R is \$61.25		
Tax filing (See crite 11. TITLE NAME STREET ADDRESS	requirement and elects to do so. aria on back) OFFICERS AND D	After May 1, Fed Amended UBR Make Check Payable to DIRECTORS	e is \$550.00 R is \$61.25 Department of State TLE AME IREET ADDRESS		
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I. 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

(ANTHONY INGENOSO) 5-15-0

5-15-02 561-966-2448