## 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P96000031854

Entity Name: LIEBT WAY TOURS SERVICES, INC.

Apr 30, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Julicut i illicipui i luce di Busiliess.	New i interput i luce of Business.

645 IVES DAIRY ROAD, APT. #310 9731 FOUNTAINBLEAU BLVD NORTH MIAMI, FL 33179 US

205

MIAMI, FL 33172

**Current Mailing Address: New Mailing Address:** 

645 IVES DAIRY ROAD, APT. #310 9731 FOUNTAINBLEAU BLVD NORTH MIAMI, FL 33179 US

MIAMI, FL 33172 US

FEI Number: 65-0663823 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CONCEICAO, HENRIQUE L 645 IVES DAIRY ROAD, APT. #310 NORTH MIAMI, FL 33179

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:

Title:

Title:

Name:

Address:

City-St-Zip:

Name:

Address:

City-St-Zip:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

() Delete

645 IVES DAIRY ROAD, APT. #310

( ) Delete

645 IVES DAIRY ROAD, APT. #310

CONCEICAO, HENRIQUE L

NORTH MIAMI, FL 33179 US

NORTH MIAMI, FL 33179 US

OLIVEIRA, VALERIA

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition CORTES, MIGUEL J Name:

9731 FOUNTAINBLEAU BLVD #205 Address:

City-St-Zip: MIAMI, FL 33172 US

Title: VD (X) Change ( ) Addition

Name: ZAROR, CARLOS

Address: 9731 FOUNTAINBELAU BLVD #205

MIAMI, FL 33172 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutés. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSE MIGUEL CORTES PD 04/30/2003