FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: \nearrow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DISIPONIS BUSINESS REPORT (UBN)					ı FILFD		
DOCUMENT # P9700008215					1 1L-L-L,/		
1. Entity Name TONY ART CORPORATION					03 AUG 14 AM 10: 39		
					SECRETARY	OF STA	TF.
DO NOT WRITE IN THIS SPACE					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
2. Principal Place of Business 12950 SW 128 STREET 3 Mailing Address 12 950 SW 12			8 ST	STREET			100100
Suite, Apt.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number Applied For 65-0736730 Not Applicable			
MIAMI, Zip	FLORIDA Country	Zip	, FLORIDA Country		5. Certificate of Status Desired	\$ {	Not Applicable 3.75 Additional
33186		33186			· · · · · · · · · · · · · · · · · · ·	Fe	e Required
			7. Name and Address of Current Registered Agent Name RAMONA CORONADO				
DO NOT WRITE				Street Address (P.O. Box Number is No. Acceptable) 7360 CORAL WAY			
IN THIS SPACE				7360 CORAL WAY SIE 21			
				City MTA			Zip Code
			11111-1-1-1-1-1	MIA		FL	33155
8. The above named eatity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida,							
SIGNATURE #	XXambrai	acontro (i applicable. (NOTE	. Da sista sa	d Agent signature required	, and a limit of the second of	DATE	
		Sales Internation (1910)	- 	a sur an 10 marine sementina	when remstating)		
	ration is eligible to satisfy its Intangible equirement and elects to do so.	After May Amended	1, Fee i	s \$550.00 💨 📥	10. Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees
	ia on back)	Make Check Payab			(0)		
TITLE	PD OFFICERS AND		inu			1817:318181 1817:31818	
NAME	420C0 CM 120 CMDBBM CMB 1		NAM				
STREET ADDRESS CITY-ST-ZIP		33186		ET ADDRESS - ST-ZIP			
TITLE			titri			ritish katiga Tibikat katiga	
NAME STREET ADDRESS		,	NAM	ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			
TITLE			, mu	가는 사람들이 모르는			
NAME STREET ADDRESS			NAM STRE	ET ADDRESS			
CITY-ST-ZIP			city	-ST-ZIP	DO NOT V	YKII	
HTLE NAME			TITLE NAM		IN THIS S	PAC	E
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		<u> </u>	1814	-ST-ZIP			
TIFLE NAME		·	, TITLE NAMI				
STREET ADDRESS			4 3 3	ET ADDRESS			
CITY-ST-ZIP TITLE			CITY	-ST-ZIP		en segmen Senskippi	
NAME			NAM	(4) A. P. A. M. B. A.			
STREET ADDRESS CITY-ST-ZIP	•			ET ADDRESS -ST-ZIP		gaa wasii Laaninka	
13. Thereby c	ertify that the information supplied with	n this filing does not qualify for	the exe	mption stated in Se	ction 119.07(3)(i), Florida Statutes. I fu	rther certify	that the information
indicated	on this report or supplemental report is	s true and accurate and that m	ov signat	ture shall bave the s	same legal effect as if made under oath 07, Florida Statutes; and that my name	that Lam	an officer or director

02/24/03

Daytime Phone #

Date

TONY ART CORPORATION

TO WHOM IT MAY CONCERN: TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

DUE TO A CHANGE OF PRINCIPAL AND MAILING ADDRESS I NEVER RECEIVED FIRST NOR SECOND NOTICE FOR 2001 UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME AT THE NEW ADDRESS LISTED IN THE ANNUAL REPORT.

CORDIALLY

LUIS A BETANCOURT

PRESIDENT