

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000056485

FILED
Feb 06, 2003
Secretary of State

Entity Name: VIDAL PARTNERSHIP (FLORIDA), INC.

Current Principal Place of Business:

9100 S. DADELAND BLVD
#904
MIAMI, FL 33156 US

New Principal Place of Business:

2000 PONCE DE LEON BLVD.
6TH FLOOR
CORAL GABLES, FL 33134 US

Current Mailing Address:

VIDAL PARTNERSHIP(FLORIDA)INC
228 E 45 ST
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 65-0838736 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 EAST PARK AVENUE
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: VIDAL, MANOLO
Address: 228 EAST 45TH ST
City-St-Zip: NEW YORK, NY 10017

Title: CFO () Delete
Name: HERNANDEZ, CARLOS
Address: 228 EAST 45TH ST
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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 Statutes. 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: CARLOS HERNANDEZ

CFO

02/06/2003

Electronic Signature of Signing Officer or Director

_____ Date