FILED Jul 24, 2003 8:00 am Secretary of State

Daytime Phone #

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

| 1. Entity Nam | e | # P970 | | 5134 | | |) | 07-24-2003 90 | - | | | |
|--|-------------------------------------|--|--------------------------|---|--|---|-------------|--|------------------------------------|----------------------------------|------------------------------|--|
| Principal Plac 5131 NW 101 MIAMI FL 331 US. | PL | S | 5131 | Mailing Address 5131 NW 101 PL MIAMI FL 33178 US | | | | | | | | |
| 2. Principal P | lace of Busin | ess | 3. Maili | 3. Mailing Address | | | | L 2003/0007 110 90311 40011 00111 00117 | i d işi i ş ilir əli | 61 611 1 1 12 40 1 | | |
| Suite, Apt. | #, etc. | | Suite | Suite, Apt. #, etc. | | | | ☐ CHECK HERE IF MAKING CHANGES | | | | |
| City & State | e | | City | City & State | | | 4. F | El Number 65-0770386 | | | plied For t Applicable | |
| Zip | p Country | | Zip | Zip Cour | | try | 5. C | 5. Certificate of Status Desired \$8.75 Additional Fee Required | | | | |
| 6. Name and Address of Current Registered Agent | | | | | | 7. Name and Address of New Registered Agent | | | | | | |
| | | | | | | Name | | ··· <u>·</u> | | | | |
| CEBALLO 5131 NW | s, edgar . 101 pl | A | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | |
| _MIAMI FL | 33178 | | | | | | | | | | | |
| | | | | | City | | | FL | Zip Code | Э | | |
| | named entitions of regist | | ent for the purpo | ose of changing it | s registere | ed office or registe | ered age | ent, or both, in the State of Florid | da. I am far | nillar with, | and accept | |
| SIGNATURE . | Signature, typed | or printed name of registered | agent and title if appli | cable. (NO | TE: Registered | I Agent signature require | ed when rei | nstating) | DATE | | | |
| After Se | otember 10 | FEE IS \$550.00 , 2003 Fee will be to Florida Departme | 750.00 | | | | | Election Campaign Finar Trust Fund Contribution. | ncing | | 0 May Be I to Fees | |
| 10. | | OFFICERS | AND DIRECTOR | RS | 11. | | ADI | DITIONS/CHANGES TO OFFIC | ERS AND D | IRECTORS | 3 IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P CEBALLO 5131 NW MIAMI FL | | | ☐ Delete | | l l | | | [| _ Change | Addition | |
| TITLE NAME STREET ADDRESS | ~~~~~ | | | ☐ Delete | TITLE NAME ≈STREE | í | | | [| _ Change | Addition | |
| CITY-ST-ZIP | | | | | CITY- | ST-ZIP | | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | ☐ Delete | | J | | | [| Change | Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | ☐ Delete | 1 | I | | | [| Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ···· | | ☐ Delete | TITLE NAME STREE | | | | [| Change | ☐ Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | ☐ Delete | TITLE NAME STREE | | | | Ĺ | Change | Addition | |
| 12. I hereby c | on this repor | t or supplemental rep | ort is true and a | ccurate and that | or the exer my signati | nption stated in S ure shall have the | same le | 19.07(3)(i), Florida Statutes. I fu egal effect as if made under oat la Statutes; and that my name a | h; that I am | an officer | or director | |

Miami, July 18th, 2003

<u>90146066</u> P97000065134

Florida Department of State Secretary of State Glenda E. Hood Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Document # P97000065134

Dear Mrs. Hood:

The purpose of this letter is to inform you that the corporation I represent, United Consulting Services, Inc. never received the 2003 Uniform Business Report. This is the first time we get the report and for that reason, on behalf of United Consulting Services, Inc. I am kindly asking you to please waive the late payment fee.

I am including a check for US \$150.00.

Best Regards,

Edgar A. Ceballos

Président

United Consulting Services, Inc.

5131 NW 101 PL Miami, FL 33178

FEI Number: 65-0770386