## UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000008780  1. Entity Name  EUROPA MIAMI IRON PRESSING, INC.					FILED	
Principal Place of Business  2002 N.W. 21st ST.  MIAMI, FL 33142					OO JUL 24 AN 10: 52  SECRETARY OF STATE TAELAHASSEE FLORIDA	
2. Principal Place		3. Mailing Address			M. 2017	
Suite, Apt. #, etc.		Suite, Apt. #, etc.  City & State			GO NOT WHITE IN HILLSEN DE	
City & State  Zip Country		Zip Country		try	4. FEI Number   Applied For   Not Applicable	
	. Name and Address of Current F			····	5. Certificate of Status Desired See Required  7. Name and Address of New Registered Agent	
GLADYS ACOSTA 2000 N.W. 21st ST. MIAMI, FL 33142				Name  Street Address (P.O. Box Number is Not Acceptable)  City  FL Zip Code		
8. The above name exitity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Signature, typed or American and all title if applicable.  9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)  Make Check Payable to Department of State)  Make Check Payable to Department of State						
NAME STREET ADDRESS	OFFICERS AND I P/V/S/T/D GLADYS ACOSTA 2000 N.W. 21st ST. MIAMI, FL 33142	DIRECTORS  Delete	12. TITLE NAMI	ET ADDRESS -S1-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  Change	
NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS		☐ Delete	NAM STRE CITY TITLE NAM	E ET ADDRESS -ST-ZIP	Change Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS    CITY-ST-ZIP		☐ Delete	TITLE NAM! STRE	ı	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			☐ Change ☐ Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	y that the information supplied with	Delete	ÇITY-	ET ADDRESS ST-ZIP	Change Addition	

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 Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:

Date Daytime Phone #

## EUROPA MIAMI IRON PRESSING, INC. DOC.#P98000008780

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

ENCLOSED YOU WILL FIND THE UNIFORM BUSINESS 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 OF SUCH 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 UNIFORM BUSINESS REPORT.

CORDIALLY.

GLADYS ACOSTA

PRESIDENT