JAN-29-03 02:33 PM Servienvios 7866210906 P.02

2001 –
2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000021559

1. Entity Name
A ART PRESS, CORP.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JAN 29 PM 3:24

200012225512
02/10/03--01011--030 **315.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business
4595 EAST 10 LANE
HIALEAH FL 33013

Mailing Address
~~4595 EAST 10 LANE~~
~~HIALEAH FL 33013~~

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address: P.O. Box 520277
Suite, Apt. #, etc.
City & State: Miami Fl.
Zip: 33152 | Country: USA

4. FEI Number: 65-0820464 | Applied For | Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
NIEVES, DANIEL
4595 EAST 10 LANE
HIALEAH FL 33013

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature] DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so ☐ (See criteria on back)

FILE NOW!!! FEE IS $550.00
After September 13, 2002 Fee will be $750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PSTD	☐ Delete
NAME	NIEVES, DANIEL	
STREET ADDRESS	4595 EAST 10 LANE	
CITY-ST-ZIP	HIALEAH FL 33013	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (4/02)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information 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 or 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] 1.29.03 (305)2018812

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A ART PRESS CORPORATION

COMMERCIAL PRINTING

1.29.03

Mrs. Pat Bailey
Florida Department of State
Division of Corporation
Tallahassee Fl.

Mrs. Bailey. I need you updated the record to my corporation A Art Press Corp. and active for send a proof to FEMA in Atlanta.

Thank you for your cooperation

Ramon Nieves.
President
A Art Press Corp.

Out of country - did not receive notice from bank, nor 60 day notice

9325 W. Okeechobee Road, Bay 9 • Hialeah Gardens, Florida 33016
Mailing Address: P.O. Box 520277 • Miami, Florida 33152