

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2002 8:00 am**  
**Secretary of State**

05-06-2002 90113 037 \*\*\*150.00

**DOCUMENT # P98000022063**

1. Entity Name  
**OLIVARES PROPERTIES INC.**

Principal Place of Business Mailing Address  
**8645 GRANDEE DRIVE 8645 GRANDEE DRIVE**  
**ORLANDO FL 32829 ORLANDO FL 32829**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **52-2108974** Applied For  
 Not Applicable

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

**OLIVARES, EMMANUEL J**  
**8645 GRANDEE DRIVE**  
**ORLANDO FL 32829**

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PCOB						
	OLIVARES, EMMANUEL J	8645 GRAN DEL DR	ORLANDO FL 32829				
	VT						
	OLIVARES, MERCEDES D	8645 GRANDEE DR	ORLANDO FL 32829				
	S						
	OLIVARES, MARIA C	8645 GRANDEE DR	ORLANDO FL 32829				
	D						
	OLIVARES, BRIAN	8645 GRANDEE DR	ORLANDO FL 32829				
	D						
	OLIVARES, JEANINE A	8645 GRANDEE DR	ORLANDO FL 32829				
	DT						
	OLIVARES, GIANCARLO	8645 GRANDEE DR	ORLANDO FL 32829				

13. I hereby certify that the information supplied with this filing does not qualify 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 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: Emmanuel J. Olivares PCOB Date: 04-22-02 Daytime Phone #: (407) 249-0078

CR2E034 (9/01)