2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) O4 JAN 29 AH 10: 36 DOCUMENT # P98000028779 1. Entity Name VENE MOTORS, INC. DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 3301 W. SR. 46 1st ST 5035 PALM AVE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number City & State Applied For 650830552 SANFORD, FL MIAMI FL 3301 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 32771 USA 33012 USA Fee Required 7. Name and Address of Current Registered Agent BOSCAN, LUIS MIGUEL DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 415 S.NORTH LAKE BLVD # 2095 Zip Code ALTAMONTE SPRINGS its this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. LUIS MIGUEL BOSCAN 12/15/03 SIGNATURE istered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) √ January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 \$5.00 May Be 10. Election Campaign Financing Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. PSTD TITLE TITLE BOSCAN, LUIS MIGUEL NAME NAME STREET ADDRESS 4151S. NORTH LAKE BLVD #2095 STREET ADDRESS ALTAMONTE SPRINGS, FL. 32701 CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP TITLE TITLE NAME NAME. STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIF TITLE THLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE. TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 supplied 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 the decrease of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath and officer or director of the corporation of the same legal effect as if made under oath and oath an oath

SIGNATURE:

LUIS MIGUEL BOSCAN SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/03

Daytime Phone #

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Principal Place of Business 3. Mailing Address										
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Ζip 32771	Country USA	Zip 33012	Counti USA	У		5. Certificate of Status	Desired [75 Additional Required	
					7.	. Name and Address	of Current Regi		- 1 - 1	
		Name BOS	Name BOSCAN, LUIS MIGUEL							
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IN THIS SPACE				415	s.No	ORTH LAKE BLVD # 2095				
				City ALT	TAMONTE SPRINGS FL Zip Code 32701					
	e named entity showits this statement tions of registered agent.	for the purpose of changing	g its registere	d office or	registered	d agent, or both, in the	State of Florida.	I am familia	r with, and accept	
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SIGNATURE	Signalities, type of anythe of registered agor		(NOTE: Registered			hen reinstating)		DATE		_
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10.	OFFICERS ANI	D DIRECTORS			· · · · · ·			*	10.7 L	
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LUIS MIGUEL BOSCAN
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/15/03

Daytime Phone #

Luis Miguel Boscan 5035 Palm Ave Hialeah, Fl. 33012 (305) 822-0669

January 23, 2004

To Whom It May Concern:

This is a brief letter stating that I did not receive the Uniform Business Report for 2003 of my company Vene Motors, Inc. Along with this letter you will find my (UBR) for the year of 2003 and for this year 2004. Also you can find a check for the amount of \$300.00.

I thank you in advance for your help and understanding. If there are any questions please feel free to give me a call at the above number.

Sincerely,

-Luis Miguel Boscan