

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 17, 2001 8:00 am**  
**Secretary of State**

05-17-2001 91307 013 \*\*\*158.75

**DOCUMENT # P98000030462**

1. Entity Name  
**LA FINCA, INC.**

Principal Place of Business                      Mailing Address  
**11999 SW 248 STREET**                      **11999 SW 248 STREET**  
**MIAMI FL 33032**                              **MIAMI FL 33032**

**657988**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>65-0844046</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			
Zip	Country	Zip	Country				

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**DORTA-DUQUE, MANUEL**  
**11999 SW 248 STREET**  
**MIAMI FL 33032**

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 Manuel Dorta-Duque                      DATE 5/10/01  
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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <input type="checkbox"/> Delete <b>DORTA-DUQUE, MANUEL</b> <b>11999 SW 248 STREET</b> <b>MIAMI FL 33032</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Manuel Dorta-Duque                      Date 5/10/01 (305) 258-6040  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                      Daytime Phone #

CR2E034 (10/00)

Attachment

657988

LA FINCA, INC.

Wholesale Tree Growers

Doc# P98000030462

11999 S.W. 248 STREET

MIAMI, FLORIDA 33032

TELEPHONE: 305-258-8811

5/10/01

Dept. of State  
Div. of Corporation

To whom it may concern:

Due to an illness in my family I was not able to come to work for the past 2 weeks. Unfortunately the girl that I left at the office did not know about these forms.

Attached is a check for the amount of the fees before May 1st. If you feel you can not accept this, please let us know and we will have to send you the difference. Thank you for your cooperation in this matter.

Sincerely,

Lizard Ygnelada (Off. mgr.)  
for La Finca, Inc.

P.S. We also have 3 other corporations that we will be sending this letter.

Thank you!  
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