2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State
04-22-2003 90043 025 ***150.00

DOCUMENT # P98000042775

1. Entity Name
LONZO, INC.

Principal Place of Business	Mailing Address
1325 S POWERLINE RD SUITE 12 POMPANO BEACH, FL 33069 US	1325 S POWERLINE RD SUITE 12 POMPANO BEACH, FL 33069 US

2. Principal Place of Business	3. Mailing Address
1000 E ATLANTIC BLVD	Same
Suite, Apt. #, etc.: 206A	Suite, Apt. #, etc.:
City & State: POMPANO BEACH, FL	City & State:
Zip: 33060 / Country: USA	Zip: / Country:

☑ CHECK HERE IF MAKING CHANGES

4. FEI Number: 65-0838953 — ☐ 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
YABAR, MANUEL 317 JACARONDA DR FORT LAUDERDALE, FL 33324	Name: Street Address (P.O. Box Number Is Not Acceptable): 317, JACARANDA DRIVE City: PLANTATION FL Zip Code: 33324

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: Manuel Yabar President 04/18/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when eliminating) DATE

FILE NOW!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YABAR, MANUEL 1325 S POWERLINE RD #12 POMPANO BEACH, FL 33069 ☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YABAR, MANUEL 1000 E ATLANTIC BLVD # 206A Pompano Beach, FL 33060 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Manuel Yabar President 04/18/03 9542149208
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)