## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #** P98000107001



## **FILED** Jan 09, 2003 8:00 am Secretary of State

MAME RAMOS, JORGE L 3830 SW 142 AVE MIAMI FL 33175  MIAMI FL 3	RELIABI		IG CORPORATI	ON OF S	SOUTH FLORI	IDA,			01-09-200.	3 90053 02	3 ***15	50.00
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Sulto, Apt. #, etc.  City & State  City & St	WILLIAM I E O	OI14		MIAI	WI FL 33175				11201111111111111111111111111111111111		- 	
City & State  Country  Country  Country  Screen Address of Current Registered Agent  Name  8. Certificate of Status Deterred Registered Agent  Name  Name  Name  Name  Name  Streed Address of New Registered Agent  Name  Streed Address (PD Box Number is Not Acceptable)  City  FL  Zip Code  City  FL  Zip Code  Streed Address (PD Box Number is Not Acceptable)  Streed Address of New Registered Agent  City  FL  Zip Code  Streed Address (PD Box Number is Not Acceptable)  City  FL  Zip Code  Streed Address (PD Box Number is Not Acceptable)  Streed Address (PD Box Number is Not Acceptable)  The above named entity submits this assignment for the purpose of changing its registered affect or registered agent, or both, in the State of Florids. I am familiar with, and acceptable to obting a purpose agent are size agent and acceptable agent acceptable agen	Principal Place of Business     Address     Address						<del></del>	-	(			
Zp Country Zip Country 5. Certificate of Status Desired S8.75 Additional Fee Required  6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 7. Name and Address Not Acceptable.)  Expense Address of Calve Calv								CHECK HERE IF MAKING CHANGES				
S. Certificate of Status Desired   S8. 75 Additional Fee Required		tate		City & State			4.		4. FEI Number 65-0887519			<del></del>
RAMOS, JORGE L  Street Address of New Registered Agent  Name  Name  Name  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  Name  Street Address (P.O. Box Number is Not Acceptable)  Name  Street Address (P.O. Box Number is Not Acceptable)  Name  Street Address (P.O. Box Number is Not Acceptable)  Name  Na	Zip ————		·			Country	· · · · · · · · · · · · · · · · · · ·	5. Certifi	cate of Status Desired	□ <b>\$</b>	8.75 Ac	fditional
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Street Address (P.O. Box Number is Not Address (P.O. Box Numbe							Name			giotoicu Ay		
MIAMI FI. 33175  B. The above named entity submits this perferent for the purpose of changing its registered digent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  FILE NOW!!!/ FEE IS \$150.00  After May 1, 2003 Fee will be \$550.00  Make Check Payable to Florida Department of State  DPTV RAMOS, JORGE L RAMOS, JORGE L RAMOS, JORGE L SR RAMOS BOS WI 142 AVE  MAMI FI. 33175  Detection Campaign Financing FILE NOW!!!  MAMI FI. 33175  Detection Campaign Financing FILE NOW!!!  MAMI FI. 33175  CITY-ST-2P  MAMI FI. 33175  Detection Campaign Financing ST. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS NI 11  MAME SIRET ADDRESS GITY-ST-2P  MAMI FI. 33175  CITY-ST-2P  MAMI FI. 33175	.7											
6. The above named entity submits this prement for the purpose of changing its registered office or registered rigent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, when the state of Florida is a familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of Florida.    FILE NOW!! FEE IS \$150.00   After May 1, 2003 Fee will be \$55,00 May 8e Addition of Florida Department of State of Florida Department of Stat	3830 SW	142 AVE					Street Address (P.O. Box Number is Not Acceptable)					
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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 changed, or on an attachment with an appears in Block 10 or Block 11 if

SIGNATURE:

1-6-03