

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000000584

FILED
Apr 01, 2002 8:00 AM
Secretary of State

Entity Name: I DEVELOP CORP.

Current Principal Place of Business:

15 MORNING SIDE DRIVE
CORAL GABLES, FL 33133 US

New Principal Place of Business:

6944 SUNRISE TERRACE
CORAL GABLES, FL 33133 US

Current Mailing Address:

15 MORNING SIDE DRIVE
CORAL GABLES, FL 33133 US

New Mailing Address:

6944 SUNRISE TERRACE
CORAL GABLES, FL 33133 US

FEI Number: 65-0884635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: ALMEIDA, JOSE A
Address: 15 MORNING SIDE DRIVE
City-St-Zip: CORAL GABLES, FL 33133

Title: VTD () Delete
Name: PARRA, HENRY
Address: 15 MORNING SIDE DRIVE
City-St-Zip: CORAL GABLES, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change () Addition
Name: ALMEIDA, JOSE A
Address: 6944 SUNRISE TERRACE
City-St-Zip: CORAL GABLES, FL 33133

Title: VTD (X) Change () Addition
Name: PARRA, HENRY
Address: 6944 SUNRISE TERRACE
City-St-Zip: CORAL GABLES, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY PARRA

VTD

04/01/2002

Electronic Signature of Signing Officer or Director

Date