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

FILED Apr 28, 2003 8:00 am Secretary of State

4/14

| 1. Entity Na | | # P9900 Ations, Inc. | 00008532 | | | 04-14-20 | 03 9040 | 01 027 | ***150.00 |) |
|---|---|--|----------------------------|--|--|---|-------------|--|------------------------------------|-----------------|
| Principal Place of Business Mailing Address 7805 CORAL WAY. SUITE 103 7805 CORAL WA MIAMI FL 33155-6539 MIAMI FL 33155- | | | | . WAY. SUITE 103 | | | | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | | |
| City & State | | City & State | | | 4. FEI Number Applied For 27-0055174 Not Applied | | | pplied For lot Applicable | } | |
| Zip | | Country | Zip | Cour | ntry | 5. Certificate of Status Desired | □ \$8 | B.75 Ad e.Require | iditional ed | |
| | 8. Name | and Address of Current | Registered Agent | | | . 7. Name and Address of New Regi | | | - | 1 |
| | | · · · · · · · · · · · · · · · · · · · | | | Name | | | | | 1 |
| VALDERRAMA, FERNANDO 7805 CORAL WAY, SUITE 103 | | Si | | Street Address (| P.O. Box Number is Not Acceptable) | | <u> </u> | | | |
| Miami Fl | 33155-6539 |) | | | City | | | Zip Cod | 40 | |
| | · · · · · · · · · · · · · · · · · · · | | · | <u> </u> | | <u></u> | FL | | | } |
| | e named entit itions of regist | | or the purpose of changing | g its register | ed office or register | ed agent, or both, in the State of Florida | a. I am fam | niliar with, | and accept | { |
| SIGNATURE | | or printed name of registered agent | and tile if applicable. | (NOTE: Pegistere | id Agent signature required | when reinstating) | DATE | | ' | |
| | | | | | | | | | | 1 |
| Afte | r May 1, 200 | ! FEE IS \$150.00 33 Fee will be \$550.00 Florida Department o | f State | | · | 9. Election Campaign Financ Trust Fund Contribution. | eing 🗆 | \$5.0 Added | 00 May Be d to Fees | - |
| Afte | r May 1, 200 k Payable to | 3 Fee will be \$550.00 | | 11. | | | · D | Added | d to Fees | |
| Afte Mai;e Chec | Pr May 1, 200 k Payable to DP VALDERRA 7805 COR | 3 Fee will be \$550.00 Florida Department o | | TITLE NAMI STRE | | Trust Fund Contribution. | RS AND DI | Added | d to Fees | E034 (10/02) |
| Afte Maija Checi 10 ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Pr May 1, 200 k Payable to DP VALDERRA 7805 COR | OFFICERS AND MA, FERNANDO AL WAY, SUITE 103 | DIRECTORS | TITLE NAMI STRE CITY TITLE NAME | EE EE EE | Trust Fund Contribution. | RS AND DI | Adde: | d to Fees S IN 11 | CR2E034 (10/02) |
| Afte Maija Checi 10 ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Pr May 1, 200 k Payable to DP VALDERRA 7805 COR | OFFICERS AND MA, FERNANDO AL WAY, SUITE 103 | DIRECTORS Delete | TITLE NAME STRE CITY TITLE NAME STREE | EE EET ADDRESSST-ZIP | Trust Fund Contribution. | RS AND DI | Adder | d to Fees S IN 11 Addition | CR2E034 (10/02) |
| Afte Maise Check 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Pr May 1, 200 k Payable to DP VALDERRA 7805 COR | OFFICERS AND MA, FERNANDO AL WAY, SUITE 103 | DIRECTORS Delete | TITLE NAMI STRE CITY TITLE NAMI STREI CITY | E E E E E E E E E E E E E E E E E E E | Trust Fund Contribution. | RS AND DI | Adder | d to Fees S IN 11 Addition | CR2E034 (10/02) |
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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 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:

DEQUIRED

4/10/03 305 269,9788

Daytime Phone #