

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000014116

FILED
Jan 22, 2002 8:00 AM
Secretary of State

Entity Name: BURGOS & SOSA, P.A.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD.
SUITE 920
CORAL GABLES, FL 33134

New Principal Place of Business:

804 DOUGLAS ROAD
SUITE 375
CORAL GABLES, FL 33134

Current Mailing Address:

2121 PONCE DE LEON BLVD.
STE 240
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 65-0904032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRATS, GABRIEL
2121 PONCE DE LEON BLVD.
STE 240
CORAL GABLES, FL 33134

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: PD () Delete
Name: BURGOS-GANDIA, HANS
Address: 2121 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

Title: SVD () Delete
Name: SOSA, MAGALI
Address: 2121 PONCE DE LEON BLVD.
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BURGOS-GANDIA, HANS
Address: 804 DOUGLAS ROAD SUITE 375
City-St-Zip: CORAL GABLES, FL 33134

Title: SVD (X) Change () Addition
Name: SOSA, MAGALI
Address: 804 DOUGLAS ROAD SUITE 375
City-St-Zip: CORAL GABLES, FL 33134

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: HANS BURGOS-GANDIA

PD

01/22/2002

Electronic Signature of Signing Officer or Director

Date