2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **P99000044737** Jul 24, 2000 8:00 am **Secretary of State** AVILA ENTERPRISES, INC. 07-24-2000 90017 045 ***150.00 Principal Place of Business Mailing Address 4361 DOGWOOD CIRCLE 4361 DOGWOOD CIRCLE WESTON FL 33326 WESTON FL 33326 2. Principal Place of Business 3. Mailing Address Cir GINGER GINGER w 1236 1236 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For FL. 33326 WESTON WESTON 65-694 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 3326 Broward ഗനയവ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name VIERA, LEOPOLDO Street Address (P.O. Box Number is Not Acceptable) 4361 DOGWOOD CIRCLE WESTON FL 33326 Zip Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change TITLE Delete TITLE NAME NAME VIERA, LEOPOLDO STREET ADDRESS STREET ADDRESS 4361 DOGWOOD CIRCLE CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33326 Change Addition TITLE ☐ Delete TITLE NAME ZEVOLO, LIRIU NAME 1236 GINGER UrdE STREET ADDRESS STREET ADDRESS WESTON, FL. 33326 CITY-ST-ZIP CITY-ST-ZIP Delete Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 11 or Block 12 if of the corporation or the receiver or trustee on changed, or on an attachment with an address

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

AHOCHMENT D#RIGOUNUS, DW 73906

July 13, 2000

Florida department of State Division of Corporation 409 East Gaines Street Tallahassee, Fl. 32399

CERTIFIED MAIL

Re: 2000 Uniform Business Report for: AVILA ENTERPRISES, INC.

To whom it may concern:

According to your instructions, we are sending you this letter in order to notify the Division of Corporation that the above referenced corporation never received the 2000 UBR prior this date.

We are enclosing a Nations Bank's check for the amount of One Hundred and Fifty Dollars (\$150.00) for the renewal fee for this year and the UBR form.

Please update your records and if we need further instructions, let us know via mail to our corporate address. We'd appreciate you help in this matter.

Sincerely,

Lirio Casino de Zevolo

Vice President of Avila Enterprises

LC/nb