

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000049815

FILED
Apr 28, 2003
Secretary of State

Entity Name: PROAMSA, INC.

Current Principal Place of Business:

4218 SW 152 AVE
E-3
MIAMI, FL 33185

New Principal Place of Business:

Current Mailing Address:

8360 WEST FLAGLER STREET
209
MIAMI, FL 33144

New Mailing Address:

3947 S.W. 156 CT
MIAMI, FL 33185

FEI Number: 65-0930545

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSTAMANTE, RAMON
3947 SW 156 CT
MIAMI, FL 33185

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUSTAMANTE, RAMON
Address: 9601 FONTAINEBLEAU BLVD. #512
City-St-Zip: MIAMI, FL 33172

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BUSTAMANTE, RAMON
Address: 3947 S.W. 156 CT
City-St-Zip: MIAMI, FL 33185

Title: D () Change (X) Addition
Name: BENITEZ, KATHIA
Address: 1114 N.E. 12 AVE
City-St-Zip: OCALA, FL 34470

Title: D () Change (X) Addition
Name: GRAJALES, DEYSI
Address: 3947 S.W. 156 CT
City-St-Zip: MIAMI, FL 33185

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: RAMON BUSTAMANTE

D

04/28/2003

Electronic Signature of Signing Officer or Director

_____ Date