

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 25, 2000 08:00 AM
Secretary of State

DOCUMENT # P99000057256

1. Entity Name
PROSERSA CORPORATION

Principal Place of Business 2333 BRICKELL AVENUE, MEZZANINE SUITE MIAMI FL 33129	Mailing Address 2333 BRICKELL AVENUE, MEZZANINE SUITE MIAMI FL 33129
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2. Principal Place of Business 3475 2ND PL Suite, Apt. #, etc.	3. Mailing Address 3475 2ND PL Suite, Apt. #, etc.
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City & State VERO BEACH FL	City & State VERO BEACH FL
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4. FEI Number 65-0938758	Applied For <input type="checkbox"/> Not Applicable
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Zip 32968	Country	Zip 32968	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MALEK FARHAD
 2333 BRICKELL AVENUE, MEZZANINE SUITE
 MIAMI FL 33129

7. Name and Address of New Registered Agent

Name CRUZ JERSAIN APD
Street Address (P.O. Box Number is Not Acceptable) 3475 2ND PL
City VERO BEACH FL
Zip Code 32968

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 **JERSAIN A CRUZ**

03/25/2000

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GUZMAN FRANKLIN VP 4451 TAYLOR DAIRY ROAD FT PIERCE FL 34946	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CRUZ JERSAIN A 3475 2ND PL VERO BEACH FL 32968	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERSAIN A CRUZ

DATE: 03/25/2000