## **2001 UNIFORM BUSINESS REPORT (UBR)**

Principal Place of Business 9422 NW 13ST #50

Mailing Address

9422 NW 13ST #50

FILED Apr 28, 2001 8:00 am Secretary of State 04-28-2001 90029 024 \*\*\*150.00 DOCUMENT # P99000074488 1. Entity Name OBRAS, INC.

2. Principal Pace of Business  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  Country  Street Address of New Registered Agent  Name  Name  Name and Address of New Registered Agent  Name  City & State Address (P.C. Box Numburis Not Acceptable)  City & FL  City Code  Street Address (P.C. Box Numburis Not Acceptable)  City & FL  City Code  8. The above named entity submits this statement for the purpose of changing its registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Sichal Tube  Signate Opens or premise were registered agent, or both. In the State of Florida.  Signate Opens or premise were registered agent, or both. In the State of Florida.  Signate Opens or premise were registered agent, or both. In the State Opens or premise were registered.  In Election Campaign Financing Trust Function Contribution.  Signate Opens or premise were registered.  In Election Campaign Financing Trust Function Contribution.  Signate Opens or premise registered.  In Election Campaign Fi	MIAMI FL 33158 US		MIAMI FL 33158 US				6 4 6 7 2 5					
City & State  City & State  City & State  City & State  Country  Country  S. Certificate of Status Desired  S. S.75 Additional  S. S.75 Additional  S. S.75 Additional  Sineat Address of New Registered Agent  T. Name and Address of New Registered	2. Principal Place of Business		3. Mailing Address								11) ISH 1811	
Zip Country Zip Country	Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
Signature   Sign	City & State	е	City & State			4.	FEI Number 65-0942468			<u> </u>	·	
Name    MoreNotice   Common	Zip	Country	Zip Country		try	5.	5. Certificate of Status Desired			\$8.75 Additional		
Nome	6 Name and Address of Current Registered Agent					7.	Name and Add	ress of New R	egistered A	gent	**	
14250 S.W. 74TH COURT MIAMI FL 33158  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    Signature, lipied or strike have directed agent and the it spikeable   City   FEL   S 150,00     After MAY 1, 2001 Fee will be \$550,00     Addition Make Check Payable to Department of State     TITLE					Name	<del></del>	-					
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    Symblure, hyteric reprined name of registered agent on at the 1 applicable   (*OTE, Registered Agent signature required when remaining)   DATE	14250 S.W. 74TH COURT					Street Address (P.O. Box Number is Not Acceptable)						
SIGNATURE    Signature, typead or printed name of registered agent and site is applicable.   (NOTE, Registered Agent signature reculted when remaining)   DATE					City		·		FL	Zip Cod	e	
Tax filing requirement and elects to do so. (See criteria on back)  After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State  11. OFFICERS AND DIRECTORS  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  TITLE NAME NAME NORENO, OMAR J 14250 S.W. 74TH COURT MIAMI FL 33158  14250 S.W. 74TH COURT MIAMI FL 33158  14250 S.W. 74TH COURT MIAMI FL 33158  17. TITLE NAME BRUTNING, JACOBUS SIREET ADDRESS CITY-ST-2IP MIAMI FL 33143  17. TITLE NAME BARRETO, ROBERT JR SIREET ADDRESS CITY-ST-2IP MIAMI FL 33155  18. EBCUTNING, JACOBUS TITLE NAME NAME SIREET ADDRESS CITY-ST-2IP MIAMI FL 33155  18. EBCUTNING CARRIED CARRIED CARRIED COMPTON CONTROLLED COMPTON CARRIED CARRIED CARRIED COMPTON CARRIED C	SIGNATURE	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOT	TE: Registere	d Agent signate	re required when r	einstating)	<u> </u>	DATE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME BRUTINING, JACOBUS G225 SW 83 AVE MIAMI FL 33143  TITLE VM GARETO, ROBERT JR STREET ADDRESS CITY-ST-ZIP  TITLE NAME BARRETO, ROBERT JR STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Tax filing r	equirement and elects to do so.	After MAY 1, 2001 Fee will be \$550.00			50.00	<b>F</b>					
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CITY-ST-ZIP  13. I hereby certify that the information supplied with this filling 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	NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	)	NAM STRE CITY	E ET ADDRESS - ST - ZIP	ed in Section	119.07(3)(i). Fk	orida Statutes	further certi	_ •		

of the corporation or the receiver or trystee 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:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/24 2000