## **FILED**

Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90471 048 \*\*\*150.00

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CHECK HERE IF MAKING CHANGES								
Ti Number	Applied For							

					- 1			<b>)</b>	
2. Principal Place of I	Place of Business 3. Mailing Address								
Suite, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State		City & Star	City & State			Et Number 65-0960010 Applied For Not Applicable			
Zip	Country	Zip Cour		Country	5. (	Certificate of Status Desired	\$8.75 A	dditional	
6. Name and Address of Current Registered Agent				<del></del>	7. Name and Address of New Registered Agent				
			Name	Name					
RODRIGUEZ, FRANK A			ļ						
662 EAST 21 STREET			Street Address (P.O. Box Number is Not Acceptable)						
HIALEAH FL 3301									
THALLANT E GOOT				<u> </u>		<u> </u>	<del></del>		
				City		F	Zip Co	ode	
8. The above named	entity submits this statement	for the purpose of	changing its reg	istered office or	registered age	ent, or both, in the State of Florida. I a	ım familiar witl	n, and accept	
the obligations of r			2 0 0				•		
SIGNATURE	typed or printed name of registered age	int and title if applicable.	(NOTE: Rec	gistered Agent signatu	re required when re	einstating) DAT	E		
	WIII FFF 12 6450.00			<del></del>					
	)W!!! FEE  \$ \$150.00 , 2003 Fee will be \$550.0	,				9. Election Campaign Financing	\$5.	<b>00</b> May Be	
	ie to Florida Department					Trust Fund Contribution.		ed to Fees	
10.	<u> </u>	D DIRECTORS	<del></del>	11,	AD	  DITIONS/CHANGES TO OFFICERS A	ND DIRECTO	DS IN 11	
TITLE DOD	OTTICE NO AIN		Delete	TITLE		DITIONS/CHANGES TO OFFICERS A	Change		
	CARLOS	L	_ Delete	NAME			Change		
	S.W. 8TH ST.		ı	STREET ADDRESS					
	FL 33174			CITY-ST-ZIP					
TITLE V	,	·· ·· ·	] Delete	TITLE			Change	Addition	
	GUEZ, FRANK A	_	_ Delete	NAME			onango		
	AST 21 STREET		1	STREET ADDRESS				l	
	AH FL 33013		L	CITY-ST-ZIP					
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NAME				NAME				ľ	
STREET ADDRESS			1	STREET ADDRESS					
CITY-ST-ZIP				CITY-ST-ZIP					

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CARLOSI LOO! TUPRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

2003 FOR PROFIT CORPORATION

**UNIFORM BUSINESS REPORT (UBR)** 

**DOCUMENT #** 

Principal Place of Business

ANGELS REALTY CORPORATION

1. Entity Name

8788 S.W. 8TH ST.

MIAM! FL 33174

P99000082327

Mailing Address

MIAMI FL 33174

8788 S.W. 8TH ST.

04-16-03 Date

Daytime Phone #