

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 03, 2002 8:00 am
Secretary of State

06-03-2002 91204 008 ***150.00

DOCUMENT # PP0000082660

1. Entity Name

The TWO Floridas Corp.

DO NOT WRITE IN THIS SPACE

80124393

2. Principal Place of Business

121 NW 24th St.

Suite, Apt. #, etc.

3. Mailing Address

290 174th St.

Suite, Apt. #, etc.

#1908

DO NOT WRITE IN THIS SPACE

City & State

MIAMI, FL

Zip

33127

Country

City & State

MIAMI, FL

Zip

33160

Country

4. FEL Number

65-0949863

Applied For

☐ Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Law Firm of Manfred Rosenow, PA

Street Address (P.O. Box Number is Not Applicable)

2425 Coral Way

City

MIAMI

FL

Zip Code

33145

**DO NOT WRITE
IN THIS SPACE**

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, 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) ☐

January 1 - May 1: Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

PD
Fidel R. Patricelli
290 174 St. #1908
MIAMI, FL 33160

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

SD
Raquel Galli
290 174 St. #1908
MIAMI, FL 33160

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature]

CR02EN34R 1/2/04