2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P99000083632

1. Entity Name RUMBA CAFE, CORP.



FILED Apr 29, 2003 8:00 am Secretary of State

04-29-2003 90038 023 ***150.00

1380 SW 8TH ST 1380			Mailing Address 1380 SW 8TH ST MIAMI FL 33135							
2. Principal P	Place of Business	3. Mailing Addr	3. Mailing Address			TAMAT SAM TMISM DMEST MRSET MNSS	ı göğli anını lak		1)610 410+1001	
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Stat	е	City & State	City & State		4. FEI Num	FEI Number - 65-0949935			oplied For ot Applicable	
Zip	Country	Zip	Count		5. Certifica	5. Certificate of Status Desired \$8.75 Addition Fee Required				
	6. Name and Address of Cui		7. Name and Address of New Registered Agent							
LORO, CARLOS J 1800 SW 22 AVE APT 14 MIAMI FL 33145				Name Street Address (P.O. Box Number is Not Acceptable)						
				City			FL	Zip Cod	le	
	named entity submits this statement ions of registered agent.				egistered agent, or b	ooth, in the State of Flor	rida. I årn far	miliar with,	and accept	
FILE NOW!!! FEE IS \$150.00 CAfter May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State						Election Campaign Fina Trust Fund Contribution	~ —		00 May Be d to Fees	
10. OFFICERS AND DIRECTORS					ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11				
TITLE	P LORO CARLOS I		elete TIT				[☐ Change	☐ Addition	

1800 S.W. 22ND AVE. APT #14 STREET ADDRESS STREET ADDRESS **MIAMI FL 33145** CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/03 (305)854-1054

CR2E034 (10/02