## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

SIGNATURE:

## May 16, 2003 8:00 am Secretary of State DOCUMENT # 05-16-2003 90184 027 \*\*\*150.00 Principal Place of Business 90135724 3. Mailing Address Principal Place of Busines: Suite, Apt. #, etc. Suite, Apt. #, etc. T CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) Zip Code City 6. 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. I am familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition Change MLE ☐ Defete HILE HAVE HAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change Addition | TIFLE Delete TITLE NAME HAME STREET ADDRESS STREET ADDRESS City\_St\_20 CITY-ST-7IP Addition Change TRE Detete TOLE HAMF NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Detete TIRLE Change ☐ Addition HAME PUARE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7P TITLE ☐ Delete MLE Change ☐ Addition HALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete me ☐ Change ☐ Addition Ċ, HAME NAME STREET ADDRESS 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 path; 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.

FILED

At tachment 90135724

H pg 90000 88737

May 12, 2003

Uniform Business Report Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

**To Whom It May Concern:** 

This letter is to inform the Division of Corporations that we did not receive our 2003 Uniform Business Report thru the mail and had to mail it in. We tried to go on the web @ sunbiz.com to print a blank UBR and all we got was a blank page, please do not penalize us for our reports.

Sincerely,

Jose Gallardo

President