

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91790 027 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

80110924

DOCUMENT # P99000095017																																																																																																																																																																																												
1. Entity Name IMOBILIARE, INC.																																																																																																																																																																																												
Principal Place of Business 101 NW 58 ST #16 MIAMI, FL 33178	Mailing Address 101 NW 58 ST #16 MIAMI, FL 33178																																																																																																																																																																																											
2. Principal Place of Business 10181 NW 58 St Suite, Apt. #, etc. Unit 16 City & State Miami, FL Zip 33178 Country USA	3. Mailing Address 10181 NW 58 St Suite, Apt. #, etc. Unit 16 City & State Miami, FL Zip 33178 Country USA	 <input checked="" type="checkbox"/> CHECK HERE IF MAKING CHANGES																																																																																																																																																																																										
4. FEI Number 65-0966111		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable																																																																																																																																																																																										
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																																																												
6. Name and Address of Current Registered Agent VALDERRAMA, CARLOS A 101 NW 58 ST #16 MIAMI, FL 33178		7. Name and Address of New Registered Agent Name Carlos A. Valderrama Street Address (P.O. Box Number is Not Acceptable) 10181 NW 58 St. Unit 16 City Miami State FL Zip Code 33178																																																																																																																																																																																										
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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent's signature required when resigning)</small> DATE 4/30/2003																																																																																																																																																																																												
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																																																																																																										
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(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, both as other life empowered. SIGNATURE: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> DATE 4/30/2003 DAYTIME PHONE # 3055440507																																																																																																																																																																																												

CR2E034 (10/02)