2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2003 8:00 am
Secretary of State
05-09-2003 90157 010 ***150.00

0206689 AV

DOCUMENT # P99000098049

1. Entity Name
LA CUBANA INVESTIGATIONS, INC.

Principal Place of Business	Mailing Address
PO BOX 140893 CORAL GABLES FL 33114	PO BOX 140893 CORAL GABLES FL 33114

2. Principal Place of Business	3. Mailing Address
717 Ponce de Leon Blvd.	717 Ponce de Leon Blvd.
Suite, Apt. #, etc. Suite #305	Suite, Apt. #, etc. Suite #305
City & State Coral Gables, FL.	City & State Coral Gables FL
Zip 33134 Country	Zip 33134 Country DADE

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0514028 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HERRERA-SHORTHOUSE, ILIANA 312 MINORCA AVE MIAMI FL 33134	Name Iliana Shorthouse Street Address (P.O. Box Number is Not Acceptable) 717 Ponce de Leon Blvd. Suite 305 City Coral Gables FL Zip Code 33134

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 ______ 2/4/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOS HERRERA-SHORTHOUSE , ILIANA PO BOX 140893 CORAL GABLES FL 33114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Iliana Shorthouse 717 Ponce de Leon Blvd. # 305 Coral Gables FL 33134 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERRERA-SHORTHOUSE , ILIANA PO BOX 140893 CORAL GABLES FL 33114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Iliana Shorthouse 717 Ponce de Leon Blvd Suite #305 Coral Gables, FC 33134 ☑ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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: SIGNATURE REQUIRED 2/4/03 (305)776 4040
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/02)