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Secretary of State

05-05-2003 91165 006 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000100883

1. Entry Name
YO LATINO, INC.

Principal Place of Business
824 PAUL STREET
ORLANDO, FL 32808 US

Mailing Address
P.O. BOX 607430
ORLANDO, FL 32860-7130 US

2. Principal Place of Business
1731 SWEETWATER W.C.
Supp. Apt #, etc.
APOPKA FL 32712
City & State
APOPKA FL

3. Mailing Address
1731 SWEETWATER W.C.
Supp. Apt #, etc.
APOPKA FL 32712
City & State
APOPKA FL

4. FEI Number
59-3513118

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
SARMIENTO, RICK
4407 MEADOWLAND DR
MOUNT DORA, FL 32757

7. Name and Address of New Registered Agent
Name
RAY SARMIENTO
Street Address (P.O. Box Number is Not Acceptable)
1731 SWEETWATER WEST CIRCLE
City
APOPKA FL Zip Code
32712

8. The above named entry 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 *Ray Sarmiento* RAY SARMIENTO - PRESIDENT 4/30/03

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 PDC	NAME SARMIENTO, IVAN R STREET ADDRESS 4407 MEADOWLAND DR CITY-ST-ZIP MOUNT DORA, FL 32757	TITLE <input checked="" type="checkbox"/> Delete	
TITLE VD	NAME SARMIENTO, RAY STREET ADDRESS 569 NORTHBRIDGE DRIVE CITY-ST-ZIP ALTAMONTE SPRINGS, FL 32714	TITLE <input type="checkbox"/> Delete	TITLE PVDC
TITLE		TITLE	NAME RAY SARMIENTO STREET ADDRESS 1731 SWEETWATER WEST CIR. CITY-ST-ZIP APOPKA FL 32712
TITLE		TITLE	
TITLE		TITLE	
TITLE		TITLE	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 of business empowerment 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 *Ray Sarmiento* 4/30/03 889-8109

SIGNATURE AND FULL PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date
Daytime Phone #

CRF0304 (10/02)