## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99 000/06723

1. Entity Name





03 DEC 23 AM 8: 42

1. Entity Name	. ,, -	
PEC	PROVEER, CIRP.	

	DO NOT WRITE		PACE	Figure of the second		₩. ~}``g	
2. Principal Place of Business 74 TERRAR 290 NW 34 TERRAR 290 NW 34 TERRAR				REINSTATEMENT 03			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5/5/03 DO NOT WRITE IN THIS SPACE 39 1/3			
City & State COCONUT CREEK, FL COCONUT CREE			ek, Fl	4. FEI Number Applied For Appl			
Zip 330	66 BZOWAND	33066	Country BROWAND	5. Certificate of Status Desi	red	ditional ed	
			Name -	7. Name and Address of Cu	rrent Registered Agent		
	DO NOT W	IRITE	ADI	MBERTO LOP	<u> </u>		
IN THIS SPACE			Street Address (P.O. Box Number is Not Acceptable)				
	C CIRT VII	PAUE					
			City Pos ad	SPRINCS	FL Zip Cod		
	Anature, typed or printed name of registere agen nuary 1 - May 1 Fee is \$15000 After May 1, Fee is \$550.00 Amended UBR is \$61.25 I Payable to Florida Department of		(E. Registered Agent signature requi	9. Election Campaig Trust Fund Contrib		00 May Be	
10.	OFFICERS AND	DIRECTORS			And the Control of th		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PRESIDENT ISABEL CAR 2190 NW 34TH T COCOMUT CREEK VP	PENO FL 33066	TITLE NAME STREET ADDRESS CITY ST-ZIP  TITLE NAME				
STREET ADDRESS CITY-ST-ZIP	JOSE A. DENA 2190 MW34TH TE COCONUT CREEK,	rrace FL 22061	STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-SI-ZIP	DO NO	TWRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP	IN THIS	SPACE		
TITLE NAME			TITLE NAME	enteren er en			

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 on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS City-ST-ZIP

CITY-ST-ZIP

TITLE NAME

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

MALLE CONTROL TEACH CONTROL CO

12/9/03 (54)972-9272

Page 2012

PC PROVEER CORP. 2190 NW 34 TERRACE COCONUT CREEK, FL 33066

September 20, 2003

Florida Department Of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

> REF: P99000106723 UNIFORM BUSINNESS REPORT

## To Whom It May Concern:

The purpose of this communication is to inform you that we had submitted our annual report/uniform business report as you requested in your letter dated May 22, 2003, signed by the new registered agent. (See copy attached). We recently received a new packaged as if we had not filed the report on time. We are attaching copy of the check and the Report as was completed and re-submitted on June 5, 2003, within the 30 days you specified in your letter. Please verify your records to ensure that it was received and posted to our account:

Document Number: P99000106723

We would appreciate your acknowledging receipt of above and this correspondence as soon as possible.

Yours truly

Isabel Carre President