

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# S32660

FILED  
Sep 23, 2002  
Secretary of State

Entity Name: OPERACIONES MERCANTILES E.L.F., INC.

## Current Principal Place of Business:

C/O ROBERT JAMERSON, ESQ.  
2655 LEJEUNE ROAD, PENTHOUSE II  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

C/O ROBERT JAMERSON, ESQ.  
2655 LEJEUNE ROAD, PENTHOUSE II  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 65-0245210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JAMERSON, ROBERT L JR. ESQ.  
C/O ROBERT JAMERSON, ESQ.  
2655 LEJEUNE ROAD, PENTHOUSE II  
CORAL GABLES, FL 33134

## Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: FUENTES, ENRIQUE  
Address: 2655 LEJUENE ROAD, PH-II  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD ( ) Delete  
Name: SPOCKES, DOMENICO  
Address: 2655 LEJUENE ROAD, PH-II  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD ( ) Delete  
Name: FUNTES CALCANO, ENRIQUE L  
Address: 2655 LEJUENE ROAD, PH-II  
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD ( ) Delete  
Name: FUENTES, SUSANA  
Address: 21050 PUNT PLACE #904  
City-St-Zip: AVENTURA, FL 33180

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: FUENTES CALCANO, ENRIQUE L  
Address: 2655 LEJUENE ROAD, PH-II  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ENRIQUE FUENTES

P

09/23/2002

Electronic Signature of Signing Officer or Director

Date