FILED Apr 14, 2003 8:00 am

DOCUMENT # V03450  1. Entity Name ELVIRA & COMPANY, INC.				Secretary of State 04-14-2003 90754 004 ***150.00			
Principal Place of Business 5891 MILITARY TRAIL LANTANA FL 33463		Mailing Address 5891 "S" MILITARY TRAIL LANTANA FL 33463 US					
2. Principal Place of Business		3. Mailing Address				VIII 1881	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<del></del>	CHECK HERE IF MAKING CHANGES		
City & State		City & State			6543194712	ed For	
Zip	Country	Zip	Countr	у	5. Certificate of Status Desired S8.75 Addition Fee Required		
	_6. Name and Address of Curren	t Registered Agent			7. Name and Address of New Registered Agent		
CANTELLO	PEDMANDO			Name			
CANTILLO, FERNANDO 5891 MILITARY TRAIL				Street Address	Street Address (P.O. Box Number is Not Acceptable)		
			-				
LANTANA F	L 33463						
				City	FL Zip Code		
		or the purpose of changin	g its registered	d office or registe	ered agent, or both, in the State of Florida. I am familiar with, and	d accept	
the obligatio	ins of registered agent.						
SIGNATURE _			~·		· · · · · · · · · · · · · · · · · · ·	'	
S	ignature, typed or printed name of registered ager	and title if applicable.	(NOTE: Registered	Agent signature require	red when reinstating) DATE		
After I	.E NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department (	: I			9. Election Campaign Financing \$5.00 Trust Fund Contribution.		
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	V 11	
TITLE	4	☐ Delete	TITLE		☐ Change [	Addition	
	Cantillo, Fernando 74 Heather Trace Dr		NAME	ADDRESS		į	
	BOYNTON BEACH FL		CITY-S	l l			
TITLE \	/PD	□ Delete	TITLE		☐ Change [	Addition	
	ESPERANZA, CANTILLO		NAME			ļ	
	74 HEATHER TRACE DR BOYNTON BEACH FL		STREET CITY-S	ADDRESS			
	DUTITION DEAUT FL		.,,	<del></del>	Change -	- Addition	
TITLE	*	☐ Defete	NAME		Change L	Addition (	
STREET ADDRESS				ADDRESS		ŀ	
CITY-ST-ZIP			CITY-S	T-ZIP			

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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(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:

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

EQ/Fernoudo Con

☐ Delete

☐ Delete

2003 FOR PROFIT CORPORATION

☐ Change

☐ Change

☐ Addition

☐ Addition