

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90137 009 ***150.00

626883



DO NOT WRITE IN THIS SPACE

DOCUMENT # V08315 1. Entity Name ANCI PROPERTIES, INC.																							
Principal Place of Business 14924 S.W. 104TH ST. UNIT 30 MIAMI FL 33196 US 12901 SW 117 ST MIAMI FL 33186 US		Mailing Address 14924 S.W. 104TH ST. UNIT 30 MIAMI FL 33196 US 12901 SW 117 STREET MIAMI FL 33186 US																					
2. Principal Place of Business 12901 SW 117 STREET Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																					
City & State MIAMI FLORIDA		City & State																					
Zip 33186	Country	Zip	Country																				
6. Name and Address of Current Registered Agent ESPOSITO, CIRO 14924 SW 104 ST #30 MIAMI FL 33196		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																					
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.																							
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE																							
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input checked="" type="checkbox"/>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>																					
FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State																							
11. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width:50%; padding: 2px;"> <input type="checkbox"/> Delete </td> </tr> <tr> <td style="padding: 2px;"> PDS ESPOSITO, ANTONIETTA 12901 SW 117 ST 14924 S.W. 104TH ST. UNIT 30 MIAMI FL 33196 </td> <td style="padding: 2px;"> 12901 SW 117 ST MIAMI FL 33186 </td> </tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	PDS ESPOSITO, ANTONIETTA 12901 SW 117 ST 14924 S.W. 104TH ST. UNIT 30 MIAMI FL 33196	12901 SW 117 ST MIAMI FL 33186	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 2px;"> TITLE NAME STREET ADDRESS CITY - ST - ZIP </td> <td style="width:50%; padding: 2px;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> <tr><td style="height: 40px;"></td><td></td></tr> </table>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition														
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13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.																							
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																							

2/19/01

(305) 665-2928

CR2E034 (10/00)

020883

Attachment # V08315

Please take note

new address:

12901 SW 117 ST

Miami FL 33186