

**FOR PROFIT CORPORATION
2002 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # V16475

1. Entity Name

LORO CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

14685 S.W. 104 STREET
Suite, Apt. #, etc.

3. Mailing Address

14685 S.W. 104 STREET
Suite, Apt. #, etc.

City & State

MIAMI - FL

Zip

33106

Country

U.S.A.

City & State

MIAMI - FL

Zip

- 33106 -

Country

- U.S.A. -

4. FEI Number

65-0318949

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

ANGELINA L. RODRIGUEZ

Street Address (P.O. Box Number is Not Acceptable)

6808 S.W. 105 COURT

City *MIAMI*

FL

Zip Code
33173

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State.

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

D/P/S
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ANGELINA L. RODRIGUEZ
6808 S.W. 105 COURT
MIAMI - FL 33173

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D/T
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ARTHUR F. RODRIGUEZ
6808 S.W. 105 COURT
MIAMI - FL 33173

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

CR2E034B (12/01)

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

SIGNATURE:

Arthur F. Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-02

Date

Daytime Phone #