

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

02-20-2002 90052 043 ***150.00

DOCUMENT # P01000032604

1. Entity Name
CAC INGENIERIA CORP.

Principal Place of Business
~~3211~~ **2121** PONCE DE LEON BLVD.
 SUITE ~~201~~ **600**
 CORAL GABLES FL 33134

Mailing Address
~~3211~~ **2121** PONCE DE LEON BLVD.
 SUITE ~~201~~ **600**
 CORAL GABLES FL 33134



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
2121 Ponce de Leon Blvd.
 Suite, Apt. #, etc.
Suite 600

3. Mailing Address
2121 Ponce de Leon Blvd.
 Suite, Apt. #, etc.
Suite 600

City & State
Coral Gables, FL
 Zip
33134 Country
USA

City & State
Coral Gables, FL
 Zip
33134 Country

4. FEI Number
65-1159860

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PORTUONDO, FERNANDO J ESQ.
~~3211~~ **2121** PONCE DE LEON BLVD.
 SUITE ~~201~~ **600**
 CORAL GABLES FL 33134

Name
Fernando J. Portuondo
 Street Address (P.O. Box Number is Not Acceptable)
2121 Ponce de Leon Blvd.
Suite 600
 City
Coral Gables FL Zip Code
33134

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 date 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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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

TITLE
D
 NAME
CALDERON, CARLOS
 STREET ADDRESS
3211 PONCE DE LEON BLVD. SUITE 201
 CITY-ST-ZIP
CORAL GABLES FL 33134

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
President
 NAME
Martin Londono
 STREET ADDRESS
2121 Ponce de Leon Blvd. #600
 CITY-ST-ZIP
Coral Gables, FL 33134

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

MARTIN LONDONO
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/1/02 **(305) 567-9453**
 Date Daytime Phone #

CR2E034 (9/01)