

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**

05-22-2001 90006 016 \*\*\*150.00

DOCUMENT # **P97000070055**

1. Entity Name

**CHS Latin America, Inc.**

Principal Place of Business

Mailing Address

**46 Montello & Kenney, P.A.  
 777 Brickell Ave  
 Suite 1070  
 Miami, FL 33131**

**659135**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

**65-0776080**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**Montello & Kenney, P.A.  
 777 Brickell Ave  
 Suite 1070  
 Miami, FL 33131**

Name

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

City

**FL**

Zip Code

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)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director, VP, Secretary	<input checked="" type="checkbox"/> Delete
NAME	Ray Bautista	
STREET ADDRESS	2010 NW 84th Ave	
CITY-ST-ZIP	Miami, FL 33122	
TITLE	President	<input checked="" type="checkbox"/> Delete
NAME	Joel Calleiro	
STREET ADDRESS	2010 NW 84th Ave	
CITY-ST-ZIP	Miami, FL 33122	
TITLE	Vice President	<input checked="" type="checkbox"/> Delete
NAME	Martin Flank	
STREET ADDRESS	2010 NW 84th Ave	
CITY-ST-ZIP	Miami, FL 33122	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	Director, President, Treasurer	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gonzalo De Velasco	
STREET ADDRESS	777 Brickell Avenue, Suite 1070	
CITY-ST-ZIP	Miami, FL 33131	
TITLE	Vice President, Secretary	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Elizabeth Jimenez	
STREET ADDRESS	777 Brickell Avenue, Suite 1070	
CITY-ST-ZIP	Miami, FL 33131	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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:

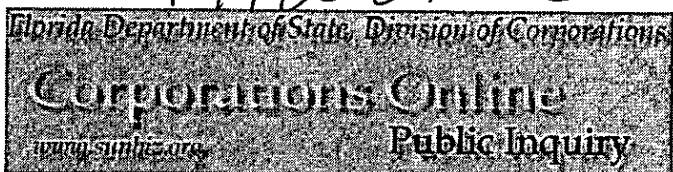
**Elizabeth Jimenez**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**5/7/01**  
 Date

**305-418-2025**  
 Daytime Phone #

CR2E034 (11/00)

Attachment  
659135  
P97 000070055



Florida Profit

CHS LATIN AMERICA, INC.

PRINCIPAL ADDRESS

2000 N.W. 84 AVENUE  
MIAMI FL 33122  
Changed 06/04/1998

MAILING ADDRESS

2000 N.W. 84 AVENUE  
MIAMI FL 33122  
Changed 06/04/1998

Document Number  
P97000070055

FEI Number  
650776080

Date Filed  
08/13/1997

State  
FL

Status  
ACTIVE

Effective Date  
08/11/1997

Registered Agent

Name & Address
MONTELLO, LOUIS R ESQUIRE MONTELLO & KENNY, P.A. 777 BRICKELL AVENUE, SUITE 1070 MIAMI FL 33131
Name Changed: 04/24/2000
Address Changed: 04/24/2000

Officer/Director Detail

Name & Address	Title
BAUTISTA, RAY 2010 NW 84TH AVENUE  MIAMI FL 33122	DVPS
CALLEIRO, JOEL 2010 NW 84TH AVENUE  MIAMI FL 33122	P
FLANK, MARTIN 2010 NW 84TH AVENUE  MIAMI FL 33122	VP

Annual Reports

Report Year	Filed Date	Intangible Tax
1998	12/28/1998	
1999	03/04/1999	
2000	04/24/2000	

Attachment  
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**THIS IS NOT OFFICIAL RECORD; SEE DOCUMENTS IF QUESTION OR CONFLICT**

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