

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 16, 2002 8:00 am**  
**Secretary of State**

07-16-2002 90365 043 \*\*\*158.75

**DOCUMENT #** 435589

**1. Entity Name**  
 ARIAS CATERING SERVICE, INC.

**Principal Place of Business**      **Mailing Address**

1651 S.W. 13RD AVE      1651 S.W. 13RD AVE.  
 MIAMI, FL. 33145      MIAMI, FL. 33145

**2. Principal Place of Business**      **3. Mailing Address**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

**City & State**      **City & State**

**Zip**      **Country**      **Zip**      **Country**

DO NOT WRITE IN THIS SPACE

**4. FEI Number** NOT APPLICABLE      **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**

MILAGROS IRUELA  
 1651 S.W. 13RD AVE.  
 MIAMI, FL. 33145

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** \_\_\_\_\_ **DATE** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**      **9. Election Campaign Financing Trust Fund Contribution.** ☐ **\$5.00 May Be Added to Fees**      **Make Check Payable to Department of State**

| 10. OFFICERS AND DIRECTORS                     |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 |   |
|--|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | P ROSES MARIA L. <input type="checkbox"/> Delete<br>3625 Anderson Rd<br>Coral Gables, Fl. 33134 | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S RODRIGUEZ OTILIA <input type="checkbox"/> Delete<br>42 N.W. 32nd Ave.<br>Miami, Fl.           | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VP IRUELA MILAGROS<br>1651 S.W. 13th Ave.<br>Miami, Fl. 33145                                   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

**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 617, 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:** *Milagros Iruela* Milagros Iruela Vice-Presd. 7-11-2002

CR25037 (9/01)

*Attachment*

*#35589  
121256*

MIAMI, FLORIDA  
July 11, 2002

Department of State  
Division of Corporation  
P.O Box 6327  
Tallahassee, Fl. 32314

Gentlemen:

Further to our phone conversation this is to inform you that I never received the Uniform Business Report.

Please find attached our check on the amount of \$158.75 to cover the 2002 Uniform Business Report as per your instructions.

There is a change of address so please correct your records.

Truly Yours

ARIAS CATERING SERVICE, INC.

*Milagros Irueña*  
MILAGROS IRUEÑA  
Vice - President  
1651 S.W. 13th Ave.  
Miami, Fl. 33145