

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 05, 2001 8:00 am
Secretary of State

05-05-2001 90829 022 ***150.00

DOCUMENT # 539250

1. Entity Name
BOCA CHICA, INC.

Principal Place of Business
% SUTERRA CORPORATION
8750 NW 36TH ST. SUITE 200
MIAMI FL 33178
US

Mailing Address
% SUTERRA CORPORATION
8750 NW 36TH ST. SUITE 200
MIAMI FL 33178
US

2. Principal Place of Business
417 E. Sheridan Street

3. Mailing Address
417 E. Sheridan Street

Suite, Apt. #, etc.
#129

Suite, Apt. #, etc.
#129

City & State
Dania Beach, Florida

City & State
Dania Beach, Florida

Zip Country
33004-4603 USA

Zip Country
33004-4603 USA

4. FEI Number **59-1798119**

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

DEL VALLE, MILLY
%SUTERRA CORPORATION
8750 N.W. 36TH ST., SUITE 200
MIAMI FL 33178

Name
Milly Del Valle, c/o Sage Solutions Inc.
Street Address (P.O. Box Number is Not Acceptable)

417 E. Sheirdan Street, #129

City Zip Code
Dania Beach, FL 33004-4603

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 **VTS** ☐ Delete
NAME **DEL VALLE, MILLY**
STREET ADDRESS **8750 NW 36TH ST, SUITE 200**
CITY-ST-ZIP **MIAMI FL**

TITLE **P** ☒ Change ☐ Addition
NAME **Del Valle, Milly**
STREET ADDRESS **417 E. Sheridan Street, #129**
CITY-ST-ZIP **Dania Beach, Florida 33004-4603**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Change ☒ Addition
NAME **Callan, Gerda**
STREET ADDRESS **11767 S. Dixie Hwy. #115**
CITY-ST-ZIP **Miami, Florida 33156**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)