2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # 574222 Mar 22, 2000 8:00 am 1. Entity Name CARVAJAL BROTHERS. INC. **Secretary of State** 03-22-2000 90057 020 ***150.00 Principal Place of Business Mailing Address 25T ROYAL PALM WAY -251 ROYAL PALM WAY --POB 2715 C/O MENDOZA, CALLAS & SCHILLING POB 2715 C/O MENDOZA, CALCAS & SCHILLING PAINT BEACH FLORIDA 33480 PALM BEACH FLORIDA 33480-2715 2. Principal Place of Business 3. Mailing Address c/o Mendoza and Callas c/o Mendoza and Callas Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. O. Box 2715 251 Royal Pa<u>lm Way, Ste 602</u> Applied For 4, FEI Number City & State City & State 59-1819539 Not Applicable Palm Beach, <u>Palm Beach, FI</u> Country \$8.75 Additional Country 5. Certificate of Status Desired 33480 USA Fee Required 33480 USA --- -7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Mario G. de Mendoza, III MENDOZA_CALLAS & SCHILLING Street Address (P.O. Box Number is Not Acceptable) c/o Mendoza and Callas 251 ROYAL PALM WAY 6TH FLOOR -PALM-BEAGH-FL-83480-1310-251 Royal Palm Way, Suite 602 ^{Zip}33480 ^{City} Palm Beach this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. 8. The above named entity s Mario G. de Mendoza, III, Reg. Agt SIGNATURE (NOTE: Registered Agent signature required when reinstating) and title. FILE NOW!!! FEE IS \$150.00 9. This corporation is aligible to satisfy its k 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. AS Delete TITLE Change Addition TITLE DE MENDOZA III, MARIO G NAME NAME STREET ADDRESS STREET ADDRESS 251 ROYAL PALM WAY CITY-ST-ZIP CITY-ST-ZIP PALM BEACH, FL 00000 ☐ Addition ☐ Delete ☐ Change TITLE TITLE CARVAJAL, PEDRO NAME NAME 251 ROYAL PALM WAY, STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP PALM BEACH FL ☐ Change ☐ Addition Delete TITLE TITLE CARVAJAL. ROGELIO NAME STREET ADDRESS 251 ROYAL PALM WAY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL ☐ Change Addition TSD Delete TITLE TITLE CARVAJAL, PATRICIO L NAME NAME STREET ADDRESS STREET ADDRESS 251 ROYAL PALM WAY CITY-ST-ZIP CITY-ST-ZIP PALM BEACH, FL 00000 Addition Change TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE Change Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of 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.

CR2E034 (9/99)

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<u>1) 834</u> Phone#

03-14-00

Pedro Carvajal, Pres.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR