

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90448 018 ***150.00

DOCUMENT # 594802

1. Entity Name

PRESTO INTERNATIONAL INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5001 S W. 74TH COURT

3. Mailing Address

Suite, Apt. #, etc.
SUITE 200

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MIAMI FLORIDA

City & State

4. FEI Number
59 1919122

Applied For
Not Applicable

Zip
33155

Country
USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name OMAR A. CHAVEZ

Street Address (P.O. Box Number is Not Acceptable)
4730 SANTA MARIA ST

City CORAL GABLES

FL

Zip Code
33146

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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	PRESIDENT, TREASURER, SECRETARY
NAME	OMAR A. CHAVEZ
STREET ADDRESS	4730 SANTA MARIA ST
CITY - ST - ZIP	CORAL GABLES FLA 33146
TITLE	VICE PRESIDENT
NAME	OMAR A. CHAVEZ JR.
STREET ADDRESS	1717 N. BAYSHORE DRIVE UNIT 2452
CITY - ST - ZIP	MIAMI FLORIDA 33132

TITLE	
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CITY - ST - ZIP	

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**DO NOT WRITE
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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 on an attachment with an address with all other like empowered.

SIGNATURE:

OMAR A. CHAVEZ JR.

OMAR A. CHAVEZ JR

5/1/02

(305) 669 8850

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)