

FILED
Apr 04, 2003 8:00 am
Secretary of State

04-04-2003 90137 017 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # 620143			
1. Entity Name CALIMA REALTY INC.			
Principal Place of Business 3562 W FAIRVIEW ST MIAMI, FL 33133 US		Mailing Address 3562 W FAIRVIEW ST MIAMI, FL 33133 US	
2. Principal Place of Business 180 HARBOR DR		3. Mailing Address C/O JAMIE GUTIERREZ	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 180 HARBOR DR	
City & State KEY BISCAYNE FL		City & State KEY BISCAYNE FL	
Zip 33149		Zip 33149	
Country FL		Country FL	
4. FEI Number 59-1918670		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		Additional Fee Required \$8.75	
6. Name and Address of Current Registered Agent GUTIERREZ, JAMIE 3562 W FAIRVIEW ST MIAMI, FL 33133		7. Name and Address of New Registered Agent 180 HARBOR DR. KEY BISCAYNE FL 33149	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE JAMIE GUTIERREZ		DATE 03/30/03	
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PST		TITLE PST	
NAME GUTIERREZ, JAMIE		NAME GUTIERREZ, JAMIE	
STREET ADDRESS 3562 W FAIRVIEW ST		STREET ADDRESS 180 HARBOR DR.	
CITY-ST-ZIP MIAMI, FL 33133		CITY-ST-ZIP KEY BISCAYNE, FL 33149	
TITLE D		TITLE VD	
NAME CAMARGO, MARIO		NAME CAMARGO MARIO	
STREET ADDRESS 11303 SW 133 PL		STREET ADDRESS 17800 SW 75 AV	
CITY-ST-ZIP MIAMI, FL		CITY-ST-ZIP MIAMI, FL 33157	
TITLE VR		TITLE VR	
NAME GUTIERREZ, EVELYN		NAME GUTIERREZ, EVELYN	
STREET ADDRESS 3562 W FAIRVIEW ST		STREET ADDRESS 3562 W FAIRVIEW ST	
CITY-ST-ZIP MIAMI, FL 33133		CITY-ST-ZIP MIAMI, FL 33133	
TITLE 		TITLE 	
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
TITLE 		TITLE 	
NAME 		NAME 	
STREET ADDRESS 		STREET ADDRESS 	
CITY-ST-ZIP 		CITY-ST-ZIP 	
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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or open attachment with an address with which I am employed.			
SIGNATURE: JAMIE GUTIERREZ		DATE 03/30/03	