

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90090 015 ****61.25

DOCUMENT # 75710Z

1. Entity Name

CABAIQUAN CLUB OF FLORIDA, INC.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

410 MANUEL PEREZ-PADILLA

3. Mailing Address

410 MANUEL PEREZ-PADILLA

Suite, Apt. #, etc.

Suite, Apt. #, etc.

181 CRANDON BLVD., #207

181 CRANDON BLVD., #207

City & State

City & State

KEY BISCAYNE, FL

KEY BISCAYNE, FL

Zip

Country

Zip

Country

33149

MIAMI-DADE

33149

MIAMI-DADE

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2089992

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

MANUEL PEREZ-PADILLA

Street Address (P.O. Box Number is Not Acceptable)

181 CRANDON BLVD

APT. #207

City

KEY BISCAYNE

FL

Zip Code

33149

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IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FEE IS \$61.25

Initial or Amended UBR

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	S
NAME	CASTELLANOS, NILDA
STREET ADDRESS	195 PENNANA DRIVE
CITY-ST-ZIP	HALEAH, FL 33010
TITLE	VD
NAME	CARNONA, JORGE
STREET ADDRESS	8735 SW 50 ST.
CITY-ST-ZIP	MIAMI, FL 33165
TITLE	PD
NAME	CANEJA, PABLO
STREET ADDRESS	7028 W. A LANE
CITY-ST-ZIP	HALEAH, FL 33014
TITLE	TD
NAME	MARTINEZ, MARIA A.
STREET ADDRESS	181 CRANDON BLVD., #207
CITY-ST-ZIP	KEY BISCAYNE, FL 33149
TITLE	VS
NAME	CANEJA, ISABEL
STREET ADDRESS	7028 W. A LANE
CITY-ST-ZIP	HALEAH, FL 33014
TITLE	VT
NAME	PENTON, OSVALDO
STREET ADDRESS	7865 SW 24 ST.
CITY-ST-ZIP	MIAMI, FL 33155

TITLE	
NAME	
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STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Maria A. Castellanos

3/19/03

305/311 9001

CR2E037B (12/02)