

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 817533

1. Entity Name

VERTIENTES-CAMAGUEY SUGAR COMPANY OF CUBA



FILED
Feb 16, 2007 08:00 AM
Secretary of State

Principal Place of Business
1111 LINCOLN ROAD
SUITE #400
MIAMI BEACH FL 33139
US

Mailing Address
1111 LINCOLN ROAD
400
MIAMI BEACH FL 33139
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Same as above
Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

City & State

4. FEI Number 98-0002691

Applied For

Not Applicable

Zip

Country

Zip

Country

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

KNOPKE, JAMES S
1111 LINCOLN RD
FOURTH FLOOR
MIAMI BEACH FL 33139

Name

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

City

FL

Zip Code

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, applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

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 C
NAME MANHEIM, GRANT
STREET ADDRESS 45 CLEVELAND SQUARE
CITY- ST- ZIP LONDON, ENGLAND w2 -6 da ☐ Delete

TITLE DVS
NAME VARET, MICHAEL A.
STREET ADDRESS 1251 AVENUE OF THE AMERICAS
CITY- ST- ZIP NEW YORK NY 10020 ☐ Delete

TITLE D
NAME BOAZ, ANDREW
STREET ADDRESS 135 EAST 57TH ST.
CITY- ST- ZIP NEW YORK NY ☐ Delete

TITLE D
NAME KATZ, RICHARD W.
STREET ADDRESS 1 KEATS GROVE
CITY- ST- ZIP HAMPSTEAD LO ☐ Delete

TITLE PD
NAME KNOPKE, JAMES S.
STREET ADDRESS 1111 LINCOLN ROAD
CITY- ST- ZIP MIAMI BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition
U00000638381
02/27/07-80030-007 150.00

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

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

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

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

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/07

(305) 538-7257

Date

Daytime Phone #