

# 2008 FORTUITOUS CORPORATION ANNUAL REPORT

**FILED**  
**May 20, 2008 8:00 am**  
**Secretary of State**

05-20-2008 90005 031 \*\*\*558.75

**DOCUMENT # 817533**

1. Entity Name  
**VERTIENTES-CAMAGUEY SUGAR COMPANY OF CUBA**



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 #  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

05152008 Chg-P CR2E034 (12/06)

4. FEI Number  
**98-0002691**

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

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

**7. Name and Address of New Registered Agent**

Name  
**MICHAEL A. VARET**  
Street Address (P.O. Box Number is Not Acceptable)  
**C/O VERTIENTES-CAMAGUEY SUGAR CO. SUITE 400  
1111 LINCOLN ROAD  
City MIAMI BEACH FL Zip Code 33139**

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 *Michael A. Varet* **MICHAEL A. VARET** **MAY 15, 2008**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
Due by September 12, 2008**

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 <input type="checkbox"/> Delete		TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MANHEIM, GRANT		NAME		
STREET ADDRESS	45 CLEVELAND SQUARE		STREET ADDRESS		
CITY-ST-ZIP	LONDON, ENGLAND, w2 6 da		CITY-ST-ZIP		
TITLE	DVS <input type="checkbox"/> Delete		TITLE	D/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	VARET, MICHAEL A.		NAME		
STREET ADDRESS	1251 AVENUE OF THE AMERICAS		STREET ADDRESS	C/O DLA PIPER, 1251 Ave of the Americas	
CITY-ST-ZIP	NEW YORK, NY 10020		CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BOAZ, ANDREW		NAME		
STREET ADDRESS	135 EAST 57TH ST.		STREET ADDRESS		
CITY-ST-ZIP	NEW YORK, NY		CITY-ST-ZIP		
TITLE	D <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KATZ, RICHARD W.		NAME		
STREET ADDRESS	1 KEATS GROVE		STREET ADDRESS		
CITY-ST-ZIP	HAMPSTEAD, LO		CITY-ST-ZIP		
TITLE	PD <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KNOPKE, JAMES S.		NAME		
STREET ADDRESS	1111 LINCOLN ROAD		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	D/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	JOHN CARROLL	
STREET ADDRESS			STREET ADDRESS	51ST FLOOR, 1251 Ave of the Americas	
CITY-ST-ZIP			CITY-ST-ZIP	NEW YORK, New York 10020	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

*Michael A. Varet* **MICHAEL A. VARET** **MAY 15, 2008**

212-335-4650

# ANNUAL REPORT

DOCUMENT # 817533

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ATTACHMENT

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City & State  
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FOURTH FLOOR  
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DATE

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TITLE	C	<input type="checkbox"/> Delete
NAME	MANHEIM, GRANT	
STREET ADDRESS	45 CLEVELAND SQUARE	
CITY-ST-ZIP	LONDON, ENGLAND, w2 6 da	
TITLE	DVS	<input type="checkbox"/> Delete
NAME	VARET, MICHAEL A.	
STREET ADDRESS	1251 AVENUE OF THE AMERICAS	
CITY-ST-ZIP	NEW YORK, NY 10020	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOAZ, ANDREW	
STREET ADDRESS	135 EAST 57TH ST.	
CITY-ST-ZIP	NEW YORK, NY	
TITLE	D	<input type="checkbox"/> Delete
NAME	KATZ, RICHARD W.	
STREET ADDRESS	1 KEATS GROVE	
CITY-ST-ZIP	HAMPSTEAD, LO	
TITLE	PD	<input type="checkbox"/> Delete
NAME	KNOPKE, JAMES S.	
STREET ADDRESS	1111 LINCOLN ROAD	
CITY-ST-ZIP	MIAMI BEACH, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D/S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JUDITH R. MACDONALD	
STREET ADDRESS	51ST FLOOR 1251 AVENUE OF THE AMERICAS	
CITY-ST-ZIP	NEW YORK, NEW YORK 10020	

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SIGNATURE: *Michael A. Varet* MICHAEL A. VARET MAY 15, 2008

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