

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2002 8:00 am
Secretary of State

01-24-2002 90208 019 ***150.00

DOCUMENT # F01000002504

1. Entity Name
CACIQUE, INC.

Principal Place of Business
14940 PROCTOR AVENUE
CITY OF INDUSTRY CA 91744

Mailing Address
~~14940 PROCTOR AVENUE~~
~~CITY OF INDUSTRY CA 91744~~
Cacique, Inc.
c/o Salmas Law Group

2. Principal Place of Business

3. Mailing Address
1880 Century Park East
 Suite, Apt. #, etc.
808

Suite, Apt. #, etc.

City & State

Zip

Country

City & State

Zip
90067

Country
USA

4. FEI Number

95-3064460

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

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.

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) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
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 NAME STREET ADDRESS CITY-ST-ZIP	PST DE CARDENAS, GILBERT 14940 PROCTOR AVENUE CITY OF INDUSTRY CA 91744	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AEDO, CHARLES 14940 PROCTOR AVENUE CITY OF INDUSTRY CA 91744	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DE CARDENAS, JENNIE 14940 PROCTOR AVENUE CITY OF INDUSTRY CA 91744	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MANAHAN, PETER T 880 OAK PARK ROAD, SUITE 101 COVINA CA 91724	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Gonzalez, Angelo 14923 Proctor Avenue La Puente, CA 91746	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior Vice President Ortega, Orlando 14940 Proctor Avenue City of Industry, CA 91744	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Angelo P. Gonzalez* **Angelo P. Gonzalez, Vice President (626) 961-0370**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)

Attachment

808433

LAW OFFICES OF
GEORGE C. SALMAS

Doc# F01000002504

1880 CENTURY PARK EAST

SUITE 808

LOS ANGELES, CALIFORNIA 90067

TELEPHONE (310) 556-0721

FACSIMILE (310) 788-8923

E-MAIL: SalmasLaw@earthlink.net

FILE NO.

January 21, 2002

VIA FEDERAL EXPRESS

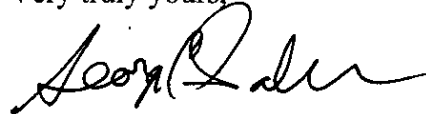
Uniform Business Report
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Re: Cacique, Inc., Document No. F01000002504

Dear Sir/Madam:

Enclosed for filing is the original 2002 Uniform Business Report (UBR) together with our check in the amount of \$150.00 payable to Department of State. Please file the original and return a conformed copy which is enclosed herewith to our office in the enclosed self addressed stamped envelope.

Very truly yours,



GEORGE C. SALMAS

GCS/am

Encl.