

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State

03-10-2003 90111 038 ***150.00

DOCUMENT # F02000002080

1. Entity Name
ASPA VIMESA INTERNACIONAL, S.L.



Principal Place of Business
**7311 NW 12 STREET. #9
MIAMI FL 33126**

Mailing Address
**7311 NW 12 STREET. #9
MIAMI FL 33126**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

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

**PALACIOS, HELIODORO
9840 SW 6 STREET
MIAMI FL 33174**

Name **IGNACIO GONZALEZ**

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

9920 NW 44 Terr. #106

City **MIAMI**

FL

Zip Code **33178**

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

IGNACIO GONZALEZ DOMINGUEZ - DIRECTOR

05/03/2003

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 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 **DP** ☐ Delete
NAME **ANTONIO-JOQUIN FABREGUES SANCHEZ**
STREET ADDRESS **POZUELO DE ALARCON, CALLE OVIEDO, 44**
CITY-ST-ZIP **MADRID SPAIN**

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

TITLE **VCV** ☐ Delete
NAME **MARLANO ALONSO HEVA**
STREET ADDRESS **ANTONIO CUMELLA, 8**
CITY-ST-ZIP **MADRID SPAIN**

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

TITLE **DS** ☐ Delete
NAME **IGNACIO GONZALEZ DOMINGUEZ**
STREET ADDRESS **SAN ESTEBAN DE GORMAZ, CALLE MAYOR, 57**
CITY-ST-ZIP **SORIA SPAIN**

TITLE **DS** ☒ Change ☐ Addition
NAME **IGNACIO GONZALEZ DOMINGUEZ**
STREET ADDRESS **9920 NW 44 Terr. #106**
CITY-ST-ZIP **MIAMI FL 33178**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 on an attachment with an address, with all other like empowered.

SIGNATURE: **IGNACIO GONZALEZ DOMINGUEZ - DIRECTOR**

05/04/2003

305-5949999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)