

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 19, 2003 8:00 am**  
**Secretary of State**

02-19-2003 90022 025 \*\*\*158.75

**DOCUMENT # F02000005802**

1. Entity Name

**SPANISH CHURRO MAGIC INC.**



Principal Place of Business  
**11773 NORTHWEST 58 ST., #90**  
**MIAMI FL 33178**

Mailing Address  
**C/O LOREN A. BLAIN, CGA**  
**BOX 5419**  
**LACOMBE, AB T4L 2A1**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**F02000005802**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JIMINEZ, MAURICIO J**  
**10773 NORTHWEST 58 ST., #90**  
**MIAMI FL 33178**

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**CDPV**  
**RAMIREZ, EMILIO "MIKE"** ☐ Delete  
**7 ASPEN DR**  
**SYLVAN LAKE, AB T4S 1H5**

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**ST**  
**RAMIREZ, EMILIO "MIKE"** ☐ Delete  
**7 ASPEN DR**  
**SYLVAN LAKE, AB T4S 1H5**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Ramirez, Lorraine** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
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CITY-ST-ZIP  
☐ Delete

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 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:

**SIGNATURE REQUIRED**

**January 29, 2003 (403) 782-5033**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)

ATTACHMENT

*Loren A. Blain*

CERTIFIED GENERAL ACCOUNTANT

80034075

Phone: 403-782-5033 Fax: 403-782-3669

Email: [lablain@telusplanet.net](mailto:lablain@telusplanet.net)

Lacombe Centre Mall

Box 5419

LACOMBE, AB T4L 1X1

F02000005802

January 29, 2003

Division of Corporations  
Uniform Business Report Filings  
PO Box 1500  
TALLAHASSEE, FL  
32302-1500

Dear Sir/Madam:

***Re: Spanish Churro Magic Inc.***  
***FEI No. F02000005802***

Please find enclosed the completed UBR form and filing fee of **\$150.00** in U.S. Fund with regards to the above named. Also please take notice that we have requested a Certificate of Status.

Trusting all enclosed is in order. Should any questions arise, please contact my office.

Yours very truly,



Loren A. Blain

LB/jmc/ref: ltrjan