

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 20, 2003 8:00 am**  
**Secretary of State**

02-20-2003 90116 023 \*\*\*150.00

**DOCUMENT # F94000001808**

1. Entity Name  
**BACARDI NORTH AMERICA, INC.**



Principal Place of Business  
2100 BISCAYNE BLVD  
MIAMI, FL 33137 US

Mailing Address  
2100 BISCAYNE BLVD  
ATTN: LEGAL DEPT  
MIAMI, FL 33137 US

**90030128**



☒ CHECK HERE IF MAKING CHANGES

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

**65-0483246**

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

C T CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324

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 PD  
NAME SARDINA, EDUARDO M ☐ Delete  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL

TITLE ☒ Change ☒ Addition  
NAME LARRIEU, JORGE  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL 33137

TITLE VP ☒ Delete  
NAME SUAREZ, OSCAR  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL 33137

TITLE ☒ Change ☒ Addition  
NAME SUTTER, KENNETH  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL 33137

TITLE SD ☐ Delete  
NAME WILSON III, FREDERICK J  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL

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

TITLE D ☐ Delete  
NAME DANGUIELLECOURT, SERGIO  
STREET ADDRESS 2100 BISCAYNE BLVD  
CITY-STATE-ZIP MIAMI, FL 33137

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-STATE-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:

*[Signature]* / FREDERICK S. WILSON / SECRETARY 2/10/03 305-573-8511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Office

Daytime Phone #

CRZE034 (10/02)