## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Mar 15, 2000 8:00 am Secretary of State **DOCUMENT # K12720** 1. Entity Name GOGACO, INC. 03-15-2000 90104 029 \*\*\*150.00 Mailing Address Principal Place of Business 3663 S W 8TH ST., 3RD FL 3663 S W 8TH ST., 3RD FL MIAMI FL 33135-4133 **MIAMI FL 33135** CHAUIN 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 65-0276274 Not Applicable \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name VALLS, FELIPE A. Street Address (P.O. Box Number is Not Acceptable) 3663 S W 8TH ST., 3RD FL MIAMI FL 33135 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS,\$150.00=- 👄 🗢 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. OFFICERS AND DIRECTORS Addition ☐ Change ☐ Delete TITLE TITLE VALLS. FELIPE A NAME NAME 3663 S W 8TH ST., 3RD FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP MIAMI FL ☐ Change ■ Addition ☐ Delete TITLE TITLE TORRES DE NAVARRA, CARLOS NAME NAME 3663 S W 8TH ST., 3RD FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP\* MIAMI FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE VALLS, FELIPE A. JR NAME NAME STREET ADDRESS 3663 S W 8TH ST., 3RD FL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change ☐ Addition TITLE TITLE Delete TORRES DE NAVARRA, CARLOS NAME NAME 3663 S W 8TH ST., 3RD FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TID F NAME

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 any attachment with an address, with all other like empowered.

CAPLES TORGES & ENAMERS. CARLOS TORRES BENAVARM

STREET ADDRESS

CITY-ST-ZIP

Wice - PRESIDENT

STREET ADDRESS CITY-ST-ZIP