

# 2002 UNIFORM BUSINESS REPORT (UBR)

0021885

DOCUMENT # N00000001767

1. Entity Name

THE SALADRIGAS FAMILY FOUNDATION, INC.

Principal Place of Business

BUSTAMANTE NUNEZ & COMPANY  
2100 PONCE DE LEON BLVD., STE. 1110  
CORLA GABLES FL 33134

Mailing Address

BUSTAMANTE NUNEZ & COMPANY  
2100 PONCE DE LEON BLVD., STE. 1110  
CORLA GABLES FL 33134

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

65-0990437

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

PENINSULA REGISTERED AGENTS, INC.  
200 S. BISCAYNE BLVD., #4874  
MIAMI FL 33131

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME SALADRIGAS, CARLOS  
STREET ADDRESS 200 S. BISCAYNE BLVD., #4874  
CITY-ST-ZIP MIAMI FL 33131

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME SALADRIGAS, LUIS R.  
STREET ADDRESS 200 S. BISCAYNE BLVD # 4874  
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☐ Delete  
NAME SALADRIGAS, JORGE A  
STREET ADDRESS 200 S. BISCAYNE BLVD., #4874  
CITY-ST-ZIP MIAMI FL 33131

TITLE ☐ Change ☐ Addition  
NAME 800005452118--4  
STREET ADDRESS -05/06/02--01021--014  
CITY-ST-ZIP \*\*\*\*\*61.25 \*\*\*\*\*61.25

TITLE D ☐ Delete  
NAME SALADRIGAS, CARLOS ALBERTO  
STREET ADDRESS 200 S. BISCAYNE BLVD., #4874  
CITY-ST-ZIP MIAMI FL 33131

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

TITLE D ☐ Delete  
NAME SALADRIGAS, OLGA  
STREET ADDRESS 200 S. BISCAYNE BLVD., #4874  
CITY-ST-ZIP MIAMI FL 33131

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

TITLE D ☐ Delete  
NAME SALADRIGAS, ELISA MARIA  
STREET ADDRESS 200 S. BISCAYNE BLVD., #4874  
CITY-ST-ZIP MIAMI FL 33131

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 617, 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:

*Carlos Saladrigas*

Carlos Saladrigas, Director 4/24/02 305-577-7058

CR2E037 (9/01)

FILED

02 APR 24 PM 2:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



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