

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000003273

1. Entity Name

C.A.D.I.L.L.A.C. CORP.

Principal Place of Business

16510 SOUTH WEST 104 AVENUE
MIAMI FL 33157

Mailing Address

16510 SOUTH WEST 104 AVENUE
MIAMI FL 33157

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

4. FEI Number

65-1009561

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

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

Wiley Alvarez
Signature, typed or printed name of registered agent and title if applicable.

President & Director

(NOTE: Registered Agent signature required when reinstating)

1-9-01

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

TITLE D ☐ Delete
NAME WARREN, WILEY ALVAREZ
STREET ADDRESS 16510 SOUTH WEST 104 AVENUE
CITY-ST-ZIP MIAMI FL 33157

TITLE D ☒ Delete
NAME FLORENCE, RODGER
STREET ADDRESS 559 NORTH WEST 44 STREET
CITY-ST-ZIP MIAMI FL 33127

TITLE D ☐ Delete
NAME LEWIS, SHAWN
STREET ADDRESS 13410 SOUTH WEST 256 STREET
CITY-ST-ZIP MIAMI FL 33032

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P/D ☒ Change ☐ Addition
NAME WARREN, WILEY ALVAREZ
STREET ADDRESS 16510 S.W. 104 AVE
CITY-ST-ZIP MIAMI FL 33157

TITLE V/S ☒ Change ☐ Addition
NAME LEWIS, SHAWN
STREET ADDRESS 13410 S.W. 256 ST
CITY-ST-ZIP MIAMI FL 33032

TITLE T ☐ Change ☒ Addition
NAME JOHNNY L. STUBBS
STREET ADDRESS 1399 NW. 56 ST
CITY-ST-ZIP MIAMI FL 33142

TITLE C ☐ Change ☒ Addition
NAME LINDSAY SPARKS
STREET ADDRESS 15800 W BUNCHE PK DR
CITY-ST-ZIP OPA-LOCKA FL 33054-6969

TITLE C ☐ Change ☒ Addition
NAME KENNETH L. WARD
STREET ADDRESS 135 N.E. 120 ST
CITY-ST-ZIP MIAMI FL 33161

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:

Wiley Alvarez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED

1-09-01

Date

256-6352

Daytime Phone #

0041613

CR2E037 (10/00)

FILED
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90089 044 ****70.00



DO NOT WRITE IN THIS SPACE