

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005405

1. Entity Name

REAL CLUB ESPANOL, INC.

FILED
Feb 27, 2002 8:00 am
Secretary of State

02-27-2002 90016 022 ****61.25

Principal Place of Business

Mailing Address

7401 NW 8TH ST
MIAMI FL 33126

7401 NW 8TH ST
MIAMI FL 33126

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

65-0533815

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

GONZALEZ, EDELMIRO
7401 N W 8TH STREET
MIAMI FL 33126

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
GONZALEZ, MIRO
9425 S W 16TH STREET
MIAMI FL 33165 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
GONZALEZ, EDELMIRO
% 7401 NW 8TH ST
MIAMI FL 33126 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
FERNANDEZ, CARLOS
1031 S W 73RD PLACE
MIAMI FL 33144 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
ZAPATA, ANGEL
340 N W 59TH AVENUE
MIAMI FL 33126 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
FERNANDEZ, CARLOS
% 7401 NW 8TH ST
MIAMI FL 33126 ☐ 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

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: EDELMIRO GONZALEZ  2/11/02 305 267-4555

CR2E037 (9/01)

Doc. & Attachment # 19400005405

417179

RITA M. MARTINEZ-CID
ACCOUNTANT AND TAX PRACTITIONER
1699 Coral Way, Suite 512
Miami, Florida 33145
Tel. 305-859-7494
Fax. 305-858-2513

INSTRUCTIONS

Client: REAL CLUB ESPANOL, INC. Date: 2/11/02

Form Profit Corporation Annual Report Period: 2002

- | | |
|---|--|
| <input checked="" type="checkbox"/> Must be signed by: AN OFFICER | <input checked="" type="checkbox"/> Amount of tax due: \$ <u>61.25</u> |
| <input checked="" type="checkbox"/> Date Required | <input checked="" type="checkbox"/> Make Check Payable To:
<u>Department of State</u> |
| <input type="checkbox"/> Title Required | <input type="checkbox"/> Amount of Refund: \$ <u> </u> |
| <input checked="" type="checkbox"/> Mail Prior To: <u>May 1, 2002</u> | <input checked="" type="checkbox"/> Envelope Enclosed |
| <input checked="" type="checkbox"/> Mail To <u>Division Of Corporations</u>
<u>Annual Report Section</u>
<u>P.O. Box 1500</u>
<u>Tallahassee, FL 32302</u> | <input checked="" type="checkbox"/> Copy Enclosed For You Files |

Remarks: _____

This slip is for instructions only, do not mail.