

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000004618

1. Entity Name

YO SOY EL FUTURO, INC.

Principal Place of Business

2979 KRISTA KEY CR  
ORLANDO FL 32817-1880

Mailing Address

2979 KRISTA KEY CR  
ORLANDO FL 32817-1880

2. Principal Place of Business

Same

3. Mailing Address

1342 E. Vine Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

# 450

City & State

Kissimmee, Florida

Zip

Country

34744

Country

U.S.A.

4. FEI Number

59-3445322

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CASTELEIRO, GLADYS  
5027 SPRING RUN AVE  
ORLANDO FL 32819

*change*

7. Name and Address of New Registered Agent

Name

Jacqueline Danzer

Street Address (P.O. Box Number is Not Acceptable)

1342 E. Vine St. # 450

City

Kissimmee

FL

Zip Code

34744

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

*Jacqueline Danzer (R.A. & Pdt)* Jacqueline Danzer

4/23/01

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

TITLE P  
NAME CASTELEIRO, GLADYS  
STREET ADDRESS 5027 SPRING RUN AVE  
CITY-ST-ZIP ORLANDO FL 32819 ☐ Delete

TITLE V  
NAME ACEVEDO, NANCY  
STREET ADDRESS 1103 WINTERSPIRNGS BLVD  
CITY-ST-ZIP WINTER SPRINGS FL 32708 ☐ Delete

TITLE DS  
NAME BISIGNANO  
STREET ADDRESS 1085 S HIWASSEE RD 522  
CITY-ST-ZIP ORLANDO FL 32801 ☒ Delete

TITLE D  
NAME RAMAS, DANIEL  
STREET ADDRESS 445 DOUGLAS AVE ST E2005-8  
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☒ Delete

TITLE D  
NAME PEREZ, ALBA  
STREET ADDRESS 4700 HEARTHSIDE DR  
CITY-ST-ZIP ORLANDO FL 32837 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE President  
NAME Jacqueline Danzer  
STREET ADDRESS 1342 E. Vine St. # 450  
CITY-ST-ZIP Kissimmee, FL 34744 ☐ Change ☒ Addition

TITLE Vice-President  
NAME Claudia Rojas  
STREET ADDRESS 1342 E. Vine St. # 450  
CITY-ST-ZIP Kissimmee, FL 34744 ☐ Change ☒ Addition

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

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:

*Jacqueline Danzer* Jacqueline Danzer (321) 697-0202  
4/23/01 Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/00)

0027313

FILED  
Apr 27, 2001 8:00 am  
Secretary of State

04-27-2001 90268 023 \*\*\*\*\*61.25

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DO NOT WRITE IN THIS SPACE