

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003748

1. Entity Name

CARNAVALES SANTIAGUEROS, INC.

FILED

Apr 16, 2001 8:00 am  
Secretary of State

04-16-2001 90031 016 \*\*\*\*61.25

Principal Place of Business

10250 SW 28TH ST  
MIAMI FL 33165

Mailing Address

10250 SW 28TH ST  
MIAMI FL 33165

00036529

2. Principal Place of Business

9660 SW 8TH ST  
Suite, Apt. #, etc.  
10

3. Mailing Address

9660 SW 8TH ST  
Suite, Apt. #, etc.  
10

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33174

Country

USA

Zip

33174

Country

USA

4. FEI Number

65-0901526

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PUJOL, JOSE H  
10250 SW 28TH ST  
MIAMI FL 33165

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

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 PD  
NAME LLAURADO, JOSE  
STREET ADDRESS 4410 WEST FLAGLER ST. #106  
CITY-ST-ZIP MIAMI FL 33126 ☒ Delete

TITLE VPD  
NAME TOLENTINO, MARTA  
STREET ADDRESS 9450 SW 26 DR.  
CITY-ST-ZIP MIAMI FL 33165 ☐ Delete

TITLE D  
NAME COCA, ROSITA  
STREET ADDRESS 8025 SW 19TH ST.  
CITY-ST-ZIP MIAMI FL 33155 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE PRESIDENT  
NAME ROXI SAGUI  
STREET ADDRESS 8025 SW 19TH ST  
CITY-ST-ZIP MIAMI, FL 33155 ☒ Change ☐ Addition

TITLE TREASURER  
NAME RAMON SAGUI  
STREET ADDRESS 13817 SW 15TH ST  
CITY-ST-ZIP MIAMI, FL 33184 ☐ 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:

SIGNATURE REQUIRED: ROSI SAGUI, Pres. 2/27/01 305-229-8687

Date

Daytime Phone #

CR2E037 (10/00)