

2002 UNIFORM BUSINESS REPORT (UBR)

4/31

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

04-30-2002 90198 024 ****70.00

DOCUMENT # N99000007103

1. Entity Name

UNIDAD CIVICA PERUANA, INC.

Principal Place of Business

Mailing Address

P.O. BOX 66-8257
 MIAMI FL 33166

P.O. BOX 66-8257
 MIAMI FL 33166

95051

2. Principal Place of Business

3185 N.W. 82 AVE

3. Mailing Address

P.O. BOX 66-8257

Suite, Apt. #, etc.

108

Suite, Apt. #, etc.

City & State

MIAMI, F

City & State

MIAMI FL

Zip

33166

Country

MIAMI-DADE

Zip

33166

Country

MIAMI-DADE

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MORALES, LUIS
251 N 65 WAY
HOLLYWOOD FL 33024

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	PO	☐ Delete
NAME	MORALES, LUIS	
STREET ADDRESS	251 N 65 WAY	
CITY-ST-ZIP	HOLLYWOOD FL 33024	
TITLE	SD	☐ Delete
NAME	CARDENAS, JOSE	
STREET ADDRESS	4625 S.W. 112 PLACE	
CITY-ST-ZIP	MIAMI FL 33165	
TITLE	TD	☒ Delete
NAME	QUINONEZ, ZOILA	
STREET ADDRESS	5791 W 21 COURT	
CITY-ST-ZIP	HALEAH FL 33018	
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	CADENAS, JOSE D	
STREET ADDRESS	4625 S.W. 112 PLACE	
CITY-ST-ZIP	MIAMI, FL. 33165	
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	JULETA KOHLER	
STREET ADDRESS	18061 BISCAYNE BLVD. APT. 1401-2	
CITY-ST-ZIP	AVENTURA, FL 33160	
TITLE	TREASURER	☐ Change ☒ Addition
NAME	JUAN C. AMADOR	
STREET ADDRESS	10773 NW 5831. #205	
CITY-ST-ZIP	MIAMI, FL. 33178	
TITLE		☐ Change ☐ Addition
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)(f), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/02

Date

305-599-9943

Daytime Phone #

CR2037 (9/01)