

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000019123

1. Entity Name
CALIDAD ENTERPRISES, INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90059 002 ***150.00

Principal Place of Business

2625 NE 14TH AVE.
FT. LAUDERDALE FL 33334

Mailing Address

2625 NE 14TH AVE.
FT. LAUDERDALE FL 33334

2. Principal Place of Business

350 SW 14th Ave

Suite, Apt. #, etc.

3. Mailing Address

350 SW 14th Ave

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL

City & State

Pompano Beach FL

4. FEI Number

65-0994130

Applied For

Not Applicable

Zip

Country

33069 BROWARD

Zip

Country

33069 BROWARD

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**STRAUSS, RANDOLPH H
2625 NE 14TH AVE.
FT. LAUDERDALE FL 33334**

7. Name and Address of New Registered Agent

Name **Eric S. Kuschel**

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

350 SW 14th Ave

1

Pompano Beach

FL

Zip Code **33069**

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 **Eric S. Kuschel**

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

(NOTE: Registered Agent signature required when reinstating)

4-24-01

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition
NAME **PRESIDENT**
STREET ADDRESS **Eric S. Kuschel**
CITY-ST-ZIP **350 SW 14 AVE
Pompano Beach FL 33069**

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

TITLE ☐ Change ☒ Addition
NAME **DIRECTOR**
STREET ADDRESS **Eric S. Kuschel**
CITY-ST-ZIP **350 SW 14 AVE
Pompano Beach FL 33069**

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **Eric S. Kuschel, President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04.24.01

Daytime Phone #

(954) 785-1954

CR2E034 (10/00)