

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90368 023 \*\*\*150.00

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DOCUMENT # P00000030388

1. Entity Name

VOCES LIBRES, INC.



Principal Place of Business

4108 HEARTHSTONE DRIVE  
SARASOTA FL 34238-3202

Mailing Address

4108 HEARTHSTONE DRIVE  
SARASOTA FL 34238-3202

2. Principal Place of Business

630 BUTTOWOOD DRIVE

3. Mailing Address

SAME AS Principal

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
Longboat Key FL.

City & State

4. FEI Number  
65-0989429

Applied For  
Not Applicable

Zip  
34228

Country  
Sarasota

Zip

Country

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

6. Name and Address of Current Registered Agent

CHACON, JORGE R  
4108 HEARTHSTONE DRIVE  
SARASOTA FL 34238-3202

7. Name and Address of New Registered Agent

Name  
CHRISTINE K. ORTIZ  
Street Address (P.O. Box Number is Not Acceptable)  
630 BUTTOWOOD DRIVE

City Longboat Key FL Zip 34228

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Christine K. Ortiz*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

April 29/03

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☒ Delete  
NAME HERNANDEZ, JAIRO  
STREET ADDRESS 3409 CORONADO DR., APT. 1901  
CITY-ST-ZIP SARASOTA FL 34231

TITLE STD ☐ Delete  
NAME CHACON, JORGE R  
STREET ADDRESS 4108 HEARTHSTONE DRIVE  
CITY-ST-ZIP SARASOTA FL 34238-3202

TITLE D ☒ Delete  
NAME CHACON, JAVIER  
STREET ADDRESS 2719 BOTANY AVENUE  
CITY-ST-ZIP SARASOTA FL 34239

TITLE D ☒ Delete  
NAME CUBILLOS, ALEXANDER  
STREET ADDRESS 7024 PERSIMMON PLACE  
CITY-ST-ZIP SARASOTA FL 34243

TITLE D ☒ Delete  
NAME PEREZ, FREDY J  
STREET ADDRESS 4411 BEE RIDGE RD., #183  
CITY-ST-ZIP SARASOTA FL 34233

TITLE VD ☐ Delete  
NAME ORTIZ, LUIS F  
STREET ADDRESS 630 BUTTOWOOD DRIVE  
CITY-ST-ZIP LONGBOAT KEY FL 34228

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition  
NAME Christine K. ORTIZ  
STREET ADDRESS 630 BUTTOWOOD DR.  
CITY-ST-ZIP LONGBOAT KEY FL. 34228

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

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)(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 607, 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: *Christine K. Ortiz* CHRISTINE K. ORTIZ

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29/03 941-383-5064

Date Daytime Phone #

CR2E034 (10/02)