

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000038391

1. Entity Name
EL TROPICO TASCA, INC.

Principal Place of Business
7387 NW 36TH ST
MIAMI FL 33155

Mailing Address
7387 NW 36TH ST
MIAMI FL 33155

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1011246

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CRISONINO, RICHARD A
2534 SW 6 STREET
MIAMI FL 33135

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 registering)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PRESIDENT
HERNANDEZ, MARTHA
530 W 4TH AVE
HIALEAH FL 33012

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

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 I x e empowered

SIGNATURE:

Marta Hernandez

1/5/0091-305-477-6705

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/00)

FILED
Jul 20, 2001 8:00 am
Secretary of State

01-09-2001 90007 001 ***150.00



DO NOT WRITE IN THIS SPACE



Attachment

10/62

P000000 38391

Professional Services

MAIN OFFICE: 736 N. W. 22ND AVENUE, MIAMI, FLA. 33125
PHONES: 642-3000 - 541-3600 FAX: 541-3601

July 17, 2001

TO WHOM IT MAY CONCERN

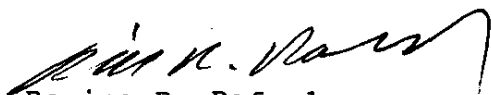
As per our conversation we are sending the 2001 Corporation Annual Report with the ID. number 65-1011246.

We never received the form that you send on January, 2001 asking for the ID. #"

Thanking you in advance for your attention to this matter.

Very truly yours,

PROFESSIONAL SERVICES
BOOKKEEPING INC.


Regina R. Rafael
Authorize Signature