

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 91211 037 ***150.00

DOCUMENT # P00000040923

1. Entity Name
COINCARGA INC.



Principal Place of Business
**8203 NW 68 STREET
MIAMI FL 33166**

Mailing Address
**8203 NW 68 STREET
MIAMI FL 33166**

11005110



2. Principal Place of Business

4767 NW 72nd AVE

3. Mailing Address

4767 NW 72nd AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

Miami, FL

City & State

Miami, FL

4. FEI Number

65-1003567

Applied For

Not Applicable

Zip

Country

33166

Zip

Country

33166

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FORERO, ANA MERCEDES
8203 NW 68 STREET
MIAMI FL 33166**

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

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 \$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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **FORERO, ANA MERCEDES**
STREET ADDRESS **CARRERA 100 NO. 44-11 SANTA DE BOGOTA,D.C.**
CITY-ST-ZIP **COLOMBIA**

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

TITLE **VPD** ☐ Delete
NAME **LOPEZ, HECTOR D**
STREET ADDRESS **CARRERA 100 NO. 44-11 SANTA DE BOGOTA,D.C.**
CITY-ST-ZIP **COLOMBIA**

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

TITLE **SD** ☐ Delete
NAME **LOPEZ, SANDRA M**
STREET ADDRESS **CARRERA 100 NO. 44-11 SANTA DE BOGOTA,D.C.**
CITY-ST-ZIP **COLOMBIA**

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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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: Mercedes Forero

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-16-03

Date

(305) 629-8014

Daytime Phone #

CR2E034 (10/02)