## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000054264

Entity Name: CRUCIGRAMAS Y PERIODISMO INC.

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

127 ANTIQUERA AVE 1756 N BAYSHORE DR

8 #35D

CORAL GABLES, FL 33134 US MIAMI, FL 33132 US

Current Mailing Address: New Mailing Address:

127 ANTIQUERA AVE 1756 N BAYSHORE DR #8 # 35D

CORAL GABLES, FL 33134 US MIAMI, FL 33132 US

FEI Number: 65-1093208 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SANTAMARIA, BEATRIZ VP
127 ANTIQUERA AVE
#8
CORAL GABLES, FL 33134 US
SANTAMARIA, BEATRIZ VP
1756 N BAYSHORE DR
# 35D
MIAMI, FL 33132 US

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: BEATRIZ SANTAMARIA 05/01/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 SANTAMARIA, DARIO
 Name:
 SANTAMARIA, DARIO

 Address:
 127 ANTIQUERA AVE #8
 Address:
 1756 N BAYSHORE DR #35D

 City-St-Zip:
 CORAL GABLES, FL 33134 US
 City-St-Zip:
 MIAMI, FL 33132 US

Title: Title: (X) Change ( ) Addition () Delete Name: SANTAMARIA, BEATRIZ VP Name: SANTAMARIA, BEATRIZ VP 127 ANTIQUERA AVE #8 1756 N BAYSHORE DR #35D Address: Address: CORAL GABLES, FL 33134 US MIAMI, FL 33132 US City-St-Zip: City-St-Zip:

Title: ( ) Delete Title: VP ( ) Change (X) Addition
Name: SANTAMARIA, ANGELA VP
Address: 1756 N BAYSHORE DR #35D

City-St-Zip: City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BEATRIZ SANTAMARIA VP 05/01/2002