

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000058360

1. Entity Name

CRACCO JEWELRY, INC.

Principal Place of Business

Mailing Address

2305 NW 20TH ST.  
MIAMI FL 33142

2305 NW 20TH ST.  
MIAMI FL 33142

2. Principal Place of Business

2300 Coral Way  
Suite, Apt. #, etc.

Suite # 200

City & State

Miami, Florida

Zip  
33145

Country  
US

3. Mailing Address

2300 Coral Way

Suite, Apt. #, etc.

Suite # 200

City & State

Miami, Florida

Zip  
33145

Country  
US

4. FEI Number

65-1013811

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

CAMPELO, ALFREDO  
2305 NW 20TH ST.  
MIAMI FL 33142

7. Name and Address of New Registered Agent

Name

FLORIDA ANNUAL REPORT SERVICES, INC.

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

2300 Coral Way, Suite 200

City

Miami

FL

Zip Code

33145

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.

AMADA CANTERA LOPEZ, President

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/01

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 D ☐ Delete  
NAME CAMPELO, ALFREDO  
STREET ADDRESS 148 S. FEDERAL HWY.  
CITY-ST-ZIP BOCA RATON FL 33432

TITLE D ☐ Delete  
NAME SALAZAR, MARTA  
STREET ADDRESS 19473 NW 56TH PL.  
CITY-ST-ZIP MIAMI FL 33055

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 VPD ☒ Change ☐ Addition  
NAME CAMPELO, ALFREDO G.  
STREET ADDRESS 148 S. Federal Hwy.  
CITY-ST-ZIP Boca Raton, FL 33432

TITLE PD ☒ Change ☐ Addition  
NAME SALAZAR, MARTA M.  
STREET ADDRESS 19473 NW 56th Pl.  
CITY-ST-ZIP Miami, FL 33055

TITLE STD ☐ Change ☒ Addition  
NAME SALAZAR, ORLANDO J.  
STREET ADDRESS 19473 NW 56th Pl.  
CITY-ST-ZIP Miami, FL 33055

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)(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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/01

CR2E034 (10/00)

0175039

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 APR 30 AM 11:33



DO NOT WRITE IN THIS SPACE