

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 28, 2001 08:00 AM**
Secretary of State**DOCUMENT # P00000058778**1. Entity Name
H.G. CARAN, CORP.**Principal Place of Business**

7205 NW 68 STREET #6

MIAMI
33166

FL

Mailing Address

7205 NW 68 STREET #6

MIAMI
33166

FL

2. Principal Place of Business

1633 EAST VINE STREET,

Suite, Apt. #, etc.
SUITE 106City & State
KISSIMMEE

FL

Zip
34744

Country

3. Mailing Address

1633 EAST VINE STREET

Suite, Apt. #, etc.
SUITE 106City & State
KISSIMMEE

FL

Zip
34744

Country

4. FEI Number
65-1016884

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentARIAS TOVAR ILEANA ESQ.
9900 STIRLING ROAD
SUITE 218
COOPER CITY
33024

US

FL

7. Name and Address of New Registered Agent

Name

MOLLEJA GREGORIO

Street Address (P.O. Box Number is Not Acceptable)
1633 EAST VINE STREET

SUITE 106

City

KISSIMMEE

FL

Zip Code
34744

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 **GREGORIO MOLLEJA****04/28/2001**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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**TITLE SD ☒ Delete
NAME ARIAS TOVAR ILEANA
STREET ADDRESS 7205 NW 68 STREET #6
CITY-ST-ZIP MIAMI FL 33166TITLE PTD ☐ Delete
NAME MOLLEJA GREGORIO A
STREET ADDRESS 7205 NW 68 STREET #6
CITY-ST-ZIP MIAMI FL 33166TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE PTDS ☒ Change ☐ Addition
NAME MOLLEJA GREGORIO A
STREET ADDRESS 1633 EAST VINE STREET, SUITE 106
CITY-ST-ZIP KISSIMMEE FL 34744TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: Gregorio Molleja

PDST

04/28/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)