

2001 UNIFORM BUSINESS REPORT (UBR)

5/3/1

FILED
Jun 05, 2001 8:00 am
Secretary of State

05-03-2001 90069 043 ***150.00

DOCUMENT # P00000071189

1. Entity Name

CILICA INTERNATIONAL, INC.

Principal Place of Business

**1161 HILLSBORO MILE #505
HILLSBORO BEACH FL 33062**

Mailing Address

**1161 HILLSBORO MILE #505
HILLSBORO BEACH FL 33062**

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

Applied For

☒ Not Applicable

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

**SOUZA, MAURICIO R
1900 W COMMERCIAL BLVD STE 140
FT LAUDERDALE FL 33309**

Name: **SOUZA, MAURICIO R**
Street Address (P.O. Box Number is Not Acceptable)
1161 HILLSBORO MILE #505
City: **HILLSBORO BEACH** FL Zip Code: **33062**

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 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: **D** ☐ Delete
NAME: **SOUZA, MAURICIO R**
STREET ADDRESS: **1161 HILLSBORO MILE #505**
CITY-ST-ZIP: **HILLSBORO BEACH FL 33062**

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

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STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **V. PRES.** ☐ Change ☒ Addition
NAME: **REININGER, MARCILIA**
STREET ADDRESS: **1161 HILLSBORO MILE #505**
CITY-ST-ZIP: **HILLSBORO BEACH, FL 33062**

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

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

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 supplement thereto is true and correct 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 filers empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAURICIO R. SOUZA

4/20/01 (954) 422-5859
Date Daytime Phone #

CR2E034 (10/00)