

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 22, 2001 8:00 am
Secretary of State

06-22-2001 90184 011 ***150.00

DOCUMENT # *P 00000081-123*

1. Entity Name
CALVIA INVESTMENTS INC

CA

Principal Place of Business **Mailing Address**
7220 NW 36 ST STE 631 **6348 NW 107 TERRACE**
MIAMI, FL 33166 **PARKLAND, FL 33076**

A0074541

2. Principal Place of Business **3. Mailing Address**
7220 NW 36 ST **6348 NW 107TH TERRACE**

Suite, Apt. #, etc. Suite, Apt. #, etc.

STE 631

City & State **City & State**
MIAMI, FL 33166 **PARKLAND, FL**

Zip **Country** **Zip** **Country**
33076 **BROWARD**

4. FEI Number **Applied For**
65-1039622 **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 Agent

NATIONSCORP REGISTERED AGENTS, INC
526 PARK AVE
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent

Name **JOSE N CORREA (J.C. ACCOUNTING)**

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

833 SAVANNAH FALLS DR 33

City **FL** **Zip Code**
WESTON **33327**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

06-18-01

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 ☐ **\$5.00 May Be Added to Fees**
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

TITLE **DPST** ☒ **Delete**
NAME **LUIS ALVAREZ**
STREET ADDRESS **AVENIDA ANDRES BELLO RES. JUNIN**
CITY-ST-ZIP **CARACAS, VENEZUELA**

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

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPST** ☐ **Change** ☒ **Addition**
NAME **RAFFAELE COVINO**
STREET ADDRESS **6348 NW 107TH TERRACE**
CITY-ST-ZIP **PARKLAND, FL 33076**

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

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

06-18-01

954-217-1207

Date

Daytime Phone #

CR2E034 (11/00)

attachment Doc# P00000081123
A0074541

CALVIA INVESTMENTS INC
6348 NW 107 TERRACE
PARKLAND, FL 33076
Phone (954) 575-7894


Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

June 19, 2001

Due to the fact that we never received the 2001 UNIFORM BUSINESS REPORT form, we as you kindly to waive the penalty for late filling and accept the enclosed check in the amount of \$150.00 for this year corporation fees.

Should you need additional information, please do not hesitate to contact us.

Sincerely yours,


Raffaele Covino
President