

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000093878

1. Entity Name

CORRECTIONAL CORPORATION OF LATIN AMERICA, INC.

Principal Place of Business

C/O LISA A. LANDY  
ONE SE 3RD AVENUE 28TH FLOOR  
MIAMI FL 33131

Mailing Address

C/O LISA A. LANDY  
ONE SE 3RD AVENUE 28TH FLOOR  
MIAMI FL 33131

2. Principal Place of Business

c/o Burton A. Landy

3. Mailing Address c/o Burton A. Landy

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

AMERICAN INFORMATION SERVICES, INC.  
ONE SE 3RD AVE 28TH FLOOR  
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 ☐ 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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS JUAN CARLOS SALMON  
CITY-ST-ZIP 7501 NW 36 STREET MIAMI FL 33166

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS ALFREDO MUNOZ  
CITY-ST-ZIP CRA 14 N° 86A 76 BOGOTA, COLOMBIA

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS PABLO CABALLERO  
CITY-ST-ZIP CRA 21 N° 62-38 BOGOTA, COLOMBIA

TITLE ☐ Change ☒ Addition  
NAME D  
STREET ADDRESS THOMAS RAPONE  
CITY-ST-ZIP 7501 NW 36 STREET MIAMI FL 33166

TITLE ☐ Change ☒ Addition  
NAME P  
STREET ADDRESS LEON SALMON  
CITY-ST-ZIP 7501 NW 36 STREET MIAMI FL 33166

TITLE ☐ Change ☒ Addition  
NAME S  
STREET ADDRESS MAURICIO MUTIS  
CITY-ST-ZIP 7501 NW 36 STREET MIAMI FL 33166

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

Juan Carlos Salmon

4/26/01

Date

(305) 477 3187

Daytime Phone #

FILED  
May 14, 2001 8:00 am  
Secretary of State

05-14-2001 90049 034 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)