

AMENDED

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000093878

1. Entity Name

CORRECTIONAL CORPORATION OF LATIN AMERICA, INC.

FILED

01 AUG 02 PM 2:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

2001-AMENDED UBR

4. FEI Number
65-1067008

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

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)

100004549281--5

08/22/01 DATE 01090-009

*****61.25 *****61.25

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
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE OCTAVIO VILLEGAS ☐ Change ☒ Addition
NAME
STREET ADDRESS 7501 NW 36 STREET MIAMI FL 33166
CITY-ST-ZIP

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

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

Juan Carlos Salmon

01-25-01 (305) 477 3187