

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000094520

1. Entity Name

EL RINCON VILLARENO CORP.

FILED

May 14, 2001 8:00 am
Secretary of State

05-14-2001 90059 013 ***150.00

Principal Place of Business

1840 WEST 49TH STREET
SUITE 705
HIALEAH FL 33012

Mailing Address

1840 WEST 49TH STREET
SUITE 705
HIALEAH FL 33012

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEL Number

65-1044719

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 Agent

TORRES, ROGELIO L
1840 WEST 49TH STREET
SUITE 705
HIALEAH FL 33012

7. Name and Address of New Registered Agent

Name ROGEL CABRERA

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

1840 West 49th Street
Suite 705

City Hialeah

FL

Zip Code 33012

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

ROGEL CABRERA

4/30/2001

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 PD ☒ Delete
NAME TORRES, ROGELIO L
STREET ADDRESS 952 EAST 26TH STREET
CITY-ST-ZIP HIALEAH FL 33013

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 PD ☐ Change ☒ Addition
NAME ROGEL CABRERA
STREET ADDRESS 952 East 26th Street
CITY-ST-ZIP Hialeah FL 33013

TITLE VPD ☒ Change ☐ Addition
NAME ROGELIO L TORRES
STREET ADDRESS 952 East 26th Street
CITY-ST-ZIP Hialeah FL 33013

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

ROGEL CABRERA, PRES.

4/30/2001

Date

(305) 642-6111

Daytime Phone #

CR2E034 (10/00)

0092151