

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

07-17-2002 90124 007 ***150.00

DOCUMENT # P00000105284

1. Entity Name

LATIN AMERICAN CONSULTING, INC.

Principal Place of Business

**7504 W TREASURE DR
N BAY VILLAGE FL 33141**

Mailing Address

**7504 W TREASURE DR
N BAY VILLAGE FL 33141**

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

65-1053983

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

LOPEZ, JUDITH M

7504 W TREASURE DR

N BAY VILLAGE FL 33141

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PSTD
LOPEZ, JUDITH M
7504 W TREASURE DR
N BAY VILLAGE FL 33141** ☐ Delete

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

TITLE
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CITY - ST - ZIP ☐ Delete

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TITLE
NAME
STREET ADDRESS
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 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:

Judith M Lopez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/10/2002
Date

(305)867-7725
Daytime Phone #

CR2E034 (4/02)

Attachment
Doc. # P00000105284
121544

July 10/2002

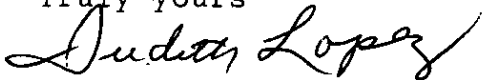
Florida Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, Florida 32314

Dear Sir:

Please find enclosed check number 1085 for the amount of \$150.00 on behalf of my Corporation that needed to be on file prior to June 7, 2002. Please note that we never received any prior notice. To avoid this inconvenience in the future, we will be registering our Company on line every February as recommended by your representative.

Thank you for your understanding in this matter.

Truly yours



Judith Lopez
President
Latin America Consulting,
Document # P00000105284
FEI 65-105398