

**2001 UNIFORM BUSINESS REPORT (UBR)**

5/

**FILED**  
**May 23, 2001 8:00 am**  
**Secretary of State**

05-04-2001 90010 028 \*\*\*150.00

**DOCUMENT # P00000110259**

1. Entity Name

LINDA LATINA, INC.

Principal Place of Business

Mailing Address

8600 SW 149TH AVE UNIT 609  
MIAMI FL 331938600 SW 149TH AVE UNIT 609  
MIAMI FL 33193

2045836

2. Principal Place of Business

3. Mailing Address

8600 SW 149 Ave Unit 609

8600 SW 149 Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit 609

Unit 609

City &amp; State

City &amp; State

Miami, FL

Miami, FL

Zip

Country

Zip

Country

33193

33193

4. FEI Number

Applied For

52-2305443

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

ARANGO, GLORIA

8600 SW 149TH AVE UNIT 609  
MIAMI FL 33193

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

Gloria P. Arango

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

(NOTE: Registered Agent signature required when reinstating)

04/21/01

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

☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
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CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change☒ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPPresident & Director  
GLORIA P. ARANGO  
8600 SW 149 AVE, #609  
MIAMI, FL 33193☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ Change☐ AdditionTITLE  
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:

Gloria Arango

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/21/01

Date

305-3880383

Daytime Phone #

CR2E034 (10/00)