

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 15, 2003 8:00 am
Secretary of State

01-15-2003 90110 001 *****8.75
01-15-2003 90110 002 ***150.00

DOCUMENT # P01000013095

1. Entity Name
ALVAREZ & GUERRERO, CORP.



Principal Place of Business
**354 OSPREY LANDING CIRCLE APT 2204
NAPLES FL 34104**

Mailing Address
**354 OSPREY LANDING CIRCLE APT 2204
NAPLES FL 34104**

2. Principal Place of Business
5480 25th pl SW
Suite, Apt. #, etc.

3. Mailing Address
5480 25th pl SW
Suite, Apt. #, etc.

City & State
Naples, FL

City & State
Naples, FL

Zip
34116 Country

Zip
34116 Country

4. FEI Number **59-3696965**

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**ALVAREZ GUERRERO, ROCIO ESTHER
354 OSPREY LANDING CIRCLE APT 2204
NAPLES FL 34104**

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **ALVAREZ GUERRERO, ROCIO ESTHER** ☐ Delete
STREET ADDRESS **354 OSPREY LANDING CIRCLE APT 2204**
CITY-ST-ZIP **NAPLES FL 34104**

TITLE **DS**
NAME **CHAVEZ, JAVIER GARCIA** ☐ Delete
STREET ADDRESS **354 OSPREY LANDING CIRCLE APT 2204**
CITY-ST-ZIP **NAPLES FL 34104**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☒ Change ☐ Addition
NAME **Alvarez Guerrero, Rocio Esther**
STREET ADDRESS **5480 25th pl SW**
CITY-ST-ZIP **Naples, FL 34116**

TITLE **DS** ☒ Change ☐ Addition
NAME **GARCIA-CHAVEZ, JAVIER**
STREET ADDRESS **5480 25th pl SW**
CITY-ST-ZIP **Naples, FL 34116**

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

12. 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 10 or Block 11 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

01-13-03 **239-5938291**
Date Daytime Phone #

CR2E034 (10/02)