

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90159 010 ***158.75

DOCUMENT # P01000033609

1. Entity Name
COLUSA INVESTMENTS, CORP.



Principal Place of Business
**175 FOUNTAINEBLEAU BLVD SUITE 2L
MIAMI FL 33172**

Mailing Address
**175 FOUNTAINEBLEAU BLVD SUITE 2L
MIAMI FL 33172**

2. Principal Place of Business

9728 SW 24 ST

3. Mailing Address

9728 SW 24 ST

Suite, Apt. #, etc.

30

Suite, Apt. #, etc.

30

City & State

Miami, FL

City & State

Miami, FL

Zip

33165

Country

U.S.A.

Zip

33165

Country

U.S.A.

4. FEI Number

65-1088421

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

POSADA, ELIZABETH

175 FOUNTAINEBLEAU BLVD SUITE 2L

MIAMI FL 33172

7. Name and Address of New Registered Agent

Name **JURADO, ADRIANA**

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

175 FOUNTAINEBLEAU BLVD STE 2L

City

Miami

FL

Zip Code

33172

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 **JURADO, ADRIANA PD**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

02-11-03

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
Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **JURADO, ADRIANA**
STREET ADDRESS **175 FOUNTAINEBLEAU BLVD SUITE 2L**
CITY-ST-ZIP **MIAMI FL 33172**

TITLE **VP** ☒ Delete
NAME **POSADA, ELIZABETH**
STREET ADDRESS **175 FOUNTAINEBLEAU BLVD SUITE 2L**
CITY-ST-ZIP **MIAMI FL 33172**

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

TITLE **VP** ☐ Change ☒ Addition
NAME **SERGIO POSADA**
STREET ADDRESS **175 FOUNTAINEBLEAU BLVD STE 2L**
CITY-ST-ZIP **Miami, FL 33172**

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

02-11-03

(305) 554-5550

CR2E034 (10/00)