

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2003 8:00 am
Secretary of State

03-21-2003 90077 011 ***150.00

DOCUMENT # P01000043421

1. Entity Name
SOL DE VARADERO, INC.



Principal Place of Business
**56 RIVERSEDGE LANE
PALM COAST FL 32137**

Mailing Address
**56 RIVERSEDGE LANE
PALM COAST FL 32137**

2. Principal Place of Business
16445 Collins Ave.

3. Mailing Address
16445 Collins Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Apt. 1122

Apt. 1122

City & State

City & State

Sunny Isles Beach

Sunny Isles Beach

Zip
33160

Country
Dade

Zip
33160

Country
Dade

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number
65-1152387

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

FUSCO, ALEXANDER
56 RIVERSEDGE LANE 16445 Collins Ave. Apt. 1122
PALM COAST FL 32137 Sunny Isles Beach, FL 33160

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 Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	FUSCO, ALEXANDER	56 RIVERSEDGE LANE	16445 Collins Ave Apt. 1122	<input checked="" type="checkbox"/>
		PALM COAST FL 32137	Sunny Isles Beach, FL	
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
D	Patricia Reyes	16445 Collins Ave	Apt. 1122	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		Sunny Isles Beach, FL	33160		
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: *Alexander Fusco*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alexander Fusco, President

Date _____ Daytime Phone # _____

CR2E034 (10/02)