

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 26, 2002 8:00 am**  
**Secretary of State**

02-26-2002 90123 050 \*\*\*158.75

**DOCUMENT # P01000049684**

1. Entity Name  
**RANCHO GUAJIRO CORP.**

Principal Place of Business

**1447 SW 131 AVENUE  
 MIAMI FL 33184**

Mailing Address

**1447 SW 131 AVENUE  
 MIAMI FL 33184**

2. Principal Place of Business

**12825 SW 17 Terr**  
 Suite, Apt. #, etc.

3. Mailing Address

**12825 SW 17 Terr**  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

**MIAMI FL**

City & State

**MIAMI FL**

4. FEI Number

Applied For

☒ Not Applicable

Zip

**33175**

Country

**U.S.**

Zip

**33175**

Country

**U.S.**

5. Certificate of Status Desired

☒

**\$8.75 Additional  
 Fee Required**

6. Name and Address of Current Registered Agent

**TEJADA, MARTHA  
 1447 SW 131 AVENUE  
 MIAMI FL 33184**

7. Name and Address of New Registered Agent

Name **MARGARITA RICARDO**

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

**12825 SW 17 Terr**

City **MIAMI**

**FL**

Zip Code **33175**

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

**Margarita Ricardo**

**2-6-02**

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 \$150.00  
 After May 1, 2002 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

TITLE **P** ☒ Delete  
 NAME **CORDERO, FRANCISCO**  
 STREET ADDRESS **8141 CRESPI BLVD., #3**  
 CITY-ST-ZIP **MIAMI BEACH FL 33141**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☒ Change ☐ Addition  
 NAME **MARGARITA RICARDO**  
 STREET ADDRESS **12825 SW 17 Terr Miami FL 33175**  
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
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TITLE ☐ Change ☐ Addition  
 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 to this report, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**2-6-02 554-9194**

Date

Daytime Phone #

CR2E034 (9/01)