

2002 **FOR PROFIT CORPORATION**
UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90175 013 ***150.00

DOCUMENT # P010Q0Q66961

1. Entity Name

CEF INTERNATIONAL CORPORATION

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1194 E. CARROLL ST

Suite, Apt. #, etc.

3. Mailing Address

1211 CARIBBEAN COVE CT

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

KISSIMMEE, FL

City & State

ORLANDO, FL

4. FEI Number

59-3730771

Applied For

Not Applicable

Zip

34744

Country

USA

Zip

32824

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

CALDERA, ENOC

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

1211 CARIBBEAN COVE CT

City **ORLANDO**

FL

Zip Code

32824

**DO NOT WRITE
IN THIS SPACE**

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

ENOC CALDERA

4/19/02

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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 NAME STREET ADDRESS CITY-ST-ZIP	PD GONZALEZ, CARLOS P.O. BOX 430376 KISSIMMEE, FL 34743	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GUCCIARDO, FRANCO 14508 LITTLE OAKLEY CT ORLANDO, FL 32824	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CALDERA, ENOC 1211 CARIBBEAN COVE CT ORLANDO, FL 32824	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

ENOC CALDERA

4/19/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #