

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 29, 2002 8:00 am**  
**Secretary of State**  
 05-29-2002 90720 020 \*\*\*150.00

**DOCUMENT # P01000071438**

1. Entity Name  
**CESA ADMINISTRATIVE SERVICES, INC.**

Principal Place of Business

10911 SW 156 ST  
 MIAMI FL 33157

Mailing Address

10911 SW 156 ST  
 MIAMI FL 33157

2. Principal Place of Business

13421 SW 80 ST

3. Mailing Address

13421 SW 80 ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

4. FEI Number

65-1130903

Applied For

Not Applicable

Zip

33186

Country

USA

Zip

33186

Country

USA

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

6. Name and Address of Current Registered Agent

CERON, JORGE  
 10911 SW 156 ST  
 MIAMI FL 33157

7. Name and Address of New Registered Agent

Name CERON JORGE

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

13421 SW 80 ST

City MIAMI

FL

Zip Code 33186

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

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 PD  
 NAME CLOFFORD, CLARA ☒ Delete  
 STREET ADDRESS 10911 SW 156 ST  
 CITY-ST-ZIP MIAMI FL 33157

TITLE VD  
 NAME CERON, JORGE ☐ Delete  
 STREET ADDRESS 10911 SW 156 ST  
 CITY-ST-ZIP MIAMI FL 33157

TITLE STD  
 NAME SANCHEZ, ALAN C ☐ Delete  
 STREET ADDRESS 10911 SW 156 ST  
 CITY-ST-ZIP MIAMI FL 33157

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

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS 13421 SW 80 ST  
 CITY-ST-ZIP MIAMI, FL 33186

TITLE ☒ Change ☐ Addition  
 NAME SANCHEZ, ALMA C  
 STREET ADDRESS 13421 SW 80 ST  
 CITY-ST-ZIP MIAMI, FL 33186

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

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 with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/15/02

Date

(305) 270 3194

Daytime Phone #

CR2E034 (9/01)