

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90764 044 \*\*\*150.00

DOCUMENT # P01000075221

1. Entity Name  
CHILICO, INC.



Principal Place of Business  
15840 SR 50, LOT 145  
CLERMONT FL 34711

Mailing Address  
15840 SR 50, LOT 145  
CLERMONT FL 34711

2. Principal Place of Business  
10345 CAYO COSTA CT

3. Mailing Address  
10345 CAYO COSTA CT

Suite, Apt. #, etc.  
CLERMONT, FL

Suite, Apt. #, etc.

City & State

City & State  
CLERMONT, FL

4. FEI Number 59-3736736

Applied For  
Not Applicable

Zip  
34711

Country  
U.S.

Zip  
34711

Country  
U.S.

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

☒ CHECK HERE IF MAKING CHANGES

## 6. Name and Address of Current Registered Agent

ASMA, WILLIAM N  
886 S DILLARD ST  
WINTER GARDEN FL 34787

## 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 D  
NAME RIVERA, WILFREDO G  
STREET ADDRESS 15840 SR 50, LOT 145  
CITY-ST-ZIP CLERMONT FL 34711 ☐ Delete

TITLE D  
NAME RICCI, VICTORIA M  
STREET ADDRESS 15840 SR 50, LOT 145  
CITY-ST-ZIP CLERMONT FL 34711 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME 10345 CAYO COSTA CT  
STREET ADDRESS CLERMONT, FL 34711 ☒ Change ☐ Addition

TITLE  
NAME 10345 CAYO COSTA CT  
STREET ADDRESS CLERMONT, FL 34711 ☒ Change ☐ Addition

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

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

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

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

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:

VICTORIA M. RICCI  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03  
Date

407-832-9122  
Daytime Phone #

CR2E034 (10/02)