

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90382 006 ***150.00

0325849 AV

DOCUMENT # P01000077312

1. Entity Name
AZUL TEL, INC.



Principal Place of Business
**7730 SW 68 TR
MIAMI FL 33143**

Mailing Address
**PO BOX 832137
MIAMI FL 33283-2137**

2. Principal Place of Business
2200 S. FEDERAL HWY

3. Mailing Address

Suite, Apt. #, etc.
506

Suite, Apt. #, etc.

City & State
MIAMI FL

City & State

Zip
33133

Country
US

Zip

Country

4. FEI Number
65-1138275

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BALLESTAS AND ASSOCIATES, INC.
7730 SW 68 TR
MIAMI FL 33143**

7. Name and Address of New Registered Agent

Name
COMPLETE CORPORATE SERVICES, INC.
Street Address (P.O. Box Number is Not Acceptable)
**915 MIDDLE RIVER DR. #410
FT. LAUDERDALE FL 33304**

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 **Achilles Ballestas**, PRES. **ACHILLES BALLESTAS** 4/21/03
Signature, type 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 ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
SASTRE, GASTON
7730 SW 68 TR
MIAMI FL 33143** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SASTRE, ALEX.
2200 S. DEER HWY #506
MIAMI, FL 33133.** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
(VICE PRESIDENT) ☐ 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
STREET ADDRESS
CITY-ST-ZIP
**PSD
SASTRE, GASTON
2200 S. FEDERAL HWY #506
MIAMI, FL 33133** ☒ 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

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 life empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

786-497-4070

CR2E034 (10/02)