

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

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90038 045 ***150.00

DOCUMENT #

P 01000078650

1. Entity Name

GELATERIA UNION & PROGRESS, INC.

DO NOT WRITE IN THIS SPACE

810316

2. Principal Place of Business

8777 COLLINS AVE.

Suite, Apt. #, etc.

#404

City & State

SURESIDE, FL

Zip

33154

Country

U.S.A.

3. Mailing Address

8777 COLLINS AVE.

Suite, Apt. #, etc.

SAME

City & State

SAME

Zip

SAME

Country

SAME

4. FEI Number

65-1129681

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

LEONELLO BORTOLOTT

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

8777 COLLINS AVENUE, #404

City

SURESIDE

FL

Zip Code

33154

**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

LEONELLO BORTOLOTT

01/09/02

Signature and 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	P/D LEONELLO BORTOLOTT 8777 COLLINS AVE., #404 SURESIDE, FLORIDA 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D EDUARDO RUBEN HAYES 8777 COLLINS AVENUE, #404 SURESIDE, FLORIDA 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T/D ANDREA JOSEFA OCANA 8777 COLLINS AVE., #404 SURESIDE, FLORIDA 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DOS JOSE LUIS AROCENA 8777 COLLINS AVE., #404 SURESIDE, FL 33154
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDUARDO ARMBAUSTER 8777 COLLINS AVENUE, #404 SURESIDE, FLORIDA 33154
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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

LEONELLO BORTOLOTT 01/09/02

Date

Daytime Phone #

(305) 867-1459

CR2E034B (12/01)