

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 04, 2003 8:00 am
Secretary of State

03-04-2003 90060 023 ***150.00

DOCUMENT # P01000096099

1. Entity Name

GUANACASTE ENTERTAINMENT INC.



Principal Place of Business

12342 SW 132 CT
MIAMI FL 33186

Mailing Address

12342 SW 132 CT
MIAMI FL 33186

2. Principal Place of Business

6975 N.W. 109th Ave

Suite, Apt. #, etc.

City & State

MIAMI, FLA

Zip

33178

Country

USA

3. Mailing Address

6975 N.W. 109th Ave

Suite, Apt. #, etc.

City & State

MIAMI, FLA

Zip

33178

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-1150994

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CASTRO, INGRID C

12342 SW 132 CT

MIAMI FL 33186

7. Name and Address of New Registered Agent

Name

Ingrid C. Castro

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

6975 NW 109th Ave

City

MIAMI

FL

Zip Code

33178

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)

2/28/03

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 ALMAGUER, HECTOR R
STREET ADDRESS 10335 SW 127 CT
CITY-ST-ZIP MIAMI FL 33186

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TITLE
NAME
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE RICARDO T. CORREOSO
NAME
STREET ADDRESS 6975 N.W. 109th Ave
CITY-ST-ZIP MIAMI, FLA. 33178

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Ricardo T. Correoso

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/03 305-798-1042

Date

Daytime Phone #

CR2E034 (10/02)