

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

FILED

DOCUMENT # P01000098630

1. Entity Name

Fuzzy's Inc.

02 AUG 23 AM 8:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

600007391716--7

-08/28/02--01045--013

\*\*\*\*\*61.25 \*\*\*\*\*61.25

2. Principal Place of Business  
3878 SW 112 Ave

3. Mailing Address  
10260 SW 137 Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Miami, Fl.

City & State  
Miami, Fl.

4. FEI Number

65-1159459

Applied For

Not Applicable

Zip  
33165

Country  
USA

Zip  
33186

Country  
USA

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name

Margarita Gonzalez

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

10260 SW 137 Ct.

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) ☐

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	President Margarita Gonzalez 10260 SW 137 Ct Miami, Fl. 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President/Secretary Ricardo Gonzalez 10260 SW 137 Ct Miami, Fl. 33186	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Managing Director Raisa Diaz 3804 SW 84 Ave. Miami, Fl. 33155	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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**DO NOT WRITE  
IN THIS SPACE**

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: Ricardo Gonzalez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034B (12/01)

FELIPE R. RUIZ

CERTIFIED PUBLIC ACCOUNTANT  
CERTIFIED FAMILY MEDIATOR  
8390 W. FLAGLER STREET, SUITE 219  
MIAMI, FL. 33144  
TEL. (305) 552-9048  
FAX. (305) 559-4094  
EMAIL:FRUIZCPA@AOL.COM

August 20, 2002

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Fl. 32314

Re: CAB INTERNATIONAL CONSULTANTS, CORP  
Doc #: P0000069742

Please note, the above referenced taxpayer completely moved it's offices from 10 NW LEJEUNE ROAD, #300, Miami, FL.33126, to 2185 NE 123 ST, #205, MIAMI, FL. 33181. Our firm has discovered that the taxpayer never received the annual report for 2002.

The taxpayer is enclosing the annual fee \$150.00 with a reinstatement form.


It was not their intentions to file late; therefore, we respectfully request that you accept the 2002 Uniform Business Report as timely filed.

If you need any additional information regarding this matter feel free to call.

Sincerely,

  
Felipe R. Ruiz

Under penalty of perjury, I declare that I have examined the above statement including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

  
Claudio J. Andrade Blanco